Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 1 of 81

Fill in this information to identify your case:	
United States Bankruptey Court for the	
United States Bankruptcy Court for the:	
Northern District of: Illinois (State)	<u> </u>
Case number (if known)	Chapter you are filing under:
	Chapter 7
	Chapter 11
	Chapter 12 ✓ Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name	Patricia	
		First name	First name
	Write the name that is on	A	
	your government-issued picture identification (for example, your driver's	Middle name	Middle name
		Denson	
lic	license or passport	Last name	Last name
	Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you		
	have used in the	First name	First name
	ast 8 years		
	Include your married or	Middle name	Middle name
	maiden names.	Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
3.	Only the last 4 digits of your	XXX - XX- 4045	xxx - xx-
	Social Security number or federal	OR	OR
	Individual Taxpayer Identification	9 xx - xx-	9 xx - xx-
	number (ITIN)		

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 2 of 81

De	ebtor 1 Patricia	A Middle Name	Denson	Case number (if known)	
	First Name	Middle Name	Last Name		
		About Debtor 1:		About Debtor 2 (Spouse	Only in a Joint Case):
4.	Any business names and Employer	I have not used any busines	ss names or EINs.	I have not used any busines	ss names or EINs.
	Identification Numbers (EIN) you have used in the	Business name		Business name	
	last 8 years	Business name		Business name	
	Include trade names and doing business as names	EIN		EIN	
		EIN		EIN	
5.	Where you live			If Debtor 2 lives at a differen	t address:
		1738 Hovland Ct Number Street		Number Street	-
		Evanston Illinois	60201		
		City State	Zip Code	City State	Zip Code
		Cook County		County	
		If your mailing address is diff fill it in here. Note that the court this mailing address.		If Debtor 2's mailing address in here. Note that the court will saddress.	
		Number Street		Number Street	
		City State	Zip Code	- City State	Zip Code
6.	Why you are	Check one:	p	Check one:	Z.p Gode
	choosing this district to file for	✓ Over the last 180 days befo	ore filing this petition, I have	Over the last 180 days before	ore filing this petition, I have
	bankruptcy	lived in this district longer t I have another reason. Exp	han in any other district. lain. (See 28 U.S.C. §§ 1408.)	lived in this district longer t I have another reason. Exp	han in any other district. lain. (See 28 U.S.C. §§ 1408.)
				.	

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 3 of 81

D	Patricia First Name	A Middle Name	Denson Last Name		Case number (if know	<u>(n)</u>
Pa	rt 2: Tell the Court Abo					
7.	The chapter of the Bankruptcy Code you are choosing to file under		rief description of each, see <i>Noti</i> the top of page 1 and check the a		-	(b) for Individuals Filing for Bankruptcy (Form
8.	How you will pay the fee	court for mor may pay with on your behalf in need to part Individuals to I request that By law, a jud less than 150 the fee in instance.	re details about how you not cash, cashier's check, on alf, your attorney may pay by the fee in installments of Pay Your Filing Fee in Installments at my fee be waived (You ge may, but is not require 10% of the official poverty I	may pay. The money of with a cree of tallments (a) may requed to, waive this option	rypically, if you rder If your a dit card or checoose this option Official Form 10 est this option of your fee, and oplies to your fan, you must fill of the results.	only if you are filing for Chapter 7. may do so only if your income is amily size and you are unable to pay but the <i>Application to Have the</i>
9.	Have you filed for bankruptcy within the last 8 years?	No. Yes. District District District	Northern District of Illinois	WhenWhenWhen	8/19/2015 MM / DD / YYYY MM / DD / YYYY	Case number
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	Yes. Debtor District Debtor District		When When	MM / DD / YYYY MM / DD / YYYY	Relationship to you Case number, if known Relationship to you Case number, if known
11.	Do you rent your residence?	✓ No.	12. landlord obtained an eviction judg Go to line 12. Fill out <i>Initial Statement About ai</i> this bankruptcy petition.			

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 4 of 81

	Patricia		A	dle Name	Denson	Case number	(if known)		
	First Name	, Buo			Last Name	-4			
12. Are you propried to propried than on propried separate	ou a sole ietor of any ir part-time ess? proprietorship usiness you te as an lual, and is not arate legal such as a	/ Bus	No.	Go to Part 4 Name and I Name of bu Number City Check the	appropriate box to describ	t State	,,	code	
petition				Com	ekbroker (as defined in 11 Un nmodity Broker (as defined e of the above	• , ,,			
Chapt Bankr and a	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in U.S.C. § 11 16(1)(B).				,				
small l	definition of business r, see 11 U.S.C. 51D).		No. No. Yes.	I am filing u Bankruptcy	Code.	NOT a small business deb		the definition in the	code.
Part 4: R	eport if You Ow	n or l	lave A	Any Hazar	dous Property or A	ny Property That Ne	eds Immedia	ate Attention	
14. Do yo any pi poses to pos immin identi	ou own or have roperty that so or is alleged se a threat of nent and fiable hazard		No. Yes.	What is the h					
safety	diate			Where is the	property? Number	Street			
own po or live be fed	ample, do you erishable goods, stock that must I, or a building eeds urgent s?				City	Sta	ate	Zip Code	

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 5 of 81

Debtor 1 Patricia A Denson Case number (if known)

First Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed about credit this bankruptcy petition, and I received a certificate of this bankruptcy petition, and I received a certificate of counseling. completion. completion. Attach a copy of the certificate and the payment plan, if any, Attach a copy of the certificate and the payment plan, if any, The law requires that that you developed with the agency. that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed counseling before this bankruptcy petition, but I do not have a this bankruptcy petition, but I do not have a you file for certificate of completion. certificate of completion. bankruptcy. You must truthfully check Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment one of the following plan, if any. plan, if any. choices. If you cannot do so, you are I certify that I asked for credit counseling services I certify that I asked for credit counseling services not eligible to file. from an approved agency, but was unable to obtain from an approved agency, but was unable to obtain those services during the 7 days after I made my those services during the 7 days after I made my If you file anyway, request, and exigent circumstances merit a 30-day request, and exigent circumstances merit a 30-day temporary waiver of the requirement. temporary waiver of the requirement. the court can dismiss your case, you will To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the requirement, lose whatever filing attach a separate sheet explaining what efforts you made to attach a separate sheet explaining what efforts you made to fee you paid, and obtain the briefing, why you were unable to obtain it before obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances you filed for bankruptcy, and what exigent circumstances your creditors can required you to file this case. required you to file this case. begin collection activities again. Your case may be dismissed if the court is dissatisfied with Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for your reasons for not receiving a briefing before you filed for bankruptcy. bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, the payment plan you developed, if any. If you do not do so, your case may be dismissed. your case may be dismissed. Any extension of the 30-day deadline is granted only for Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me incapable of deficiency that makes me incapable of realizing or making rational decisions realizing or making rational decisions about finances. Disability. My physical disability causes me to be Disability. My physical disability causes me to be unable to participate in a briefing in unable to participate in a briefing in person, by phone, or through the person, by phone, or through the internet, even after I reasonably tried internet, even after I reasonably tried to do so. to do so. Active duty. Active duty. I am currently on active military duty in I am currently on active military duty in a military combat zone. a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of about credit counseling, you must file a motion for waiver of

credit counseling with the court.

credit counseling with the court.

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 6 of 81

Debtor 1 Patricia First Name		Denson Case number (if known Last Name	1)			
	uestions for Reporting Purpo					
16. What kind of debts do you have?	 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 					
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	paid that funds will be availa	er 7. Go to line 18. Do you estimate that after any exempt property is able to distribute to unsecured creditors?	excluded and administrative expenses are			
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000			
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion			
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion			
Part 7: Sign Below						
For you	and correct. If I have chosen to file under of 11,12, or 13 of title 11, United choose to proceed under Chap If no attorney represents me ame fill out this document, I had I request relief in accordance I understand making a false so	and I did not pay or agree to pay some ve obtained and read the notice requirwith the chapter of title 11, United Stattatement, concealing property, or obtacase can result in fines up to \$250,000 52, 1341, 1519, and 3571.	eed, if eligible, under Chapter 7, vailable under each chapter, and I cone who is not an attorney to help ed by 11 U.S.C. § 342(b). See Code, specified in this petition. In ining money or property by fraud in 0, or imprisonment for up to 20			

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 7 of 81

Debtor 1	Patricia	Α	Denson	Case number (if known)
	First Name	Middle Name	Last Name		
you are by one	ur attorney, if e represented are not ented by an	eligibility to proceed ur the relief available und to the debtor(s) the no	nder Chapter 7, 11, 12 der each chapter for v tice required by 11 U.	2, or 13 of title 11, U which the person is e S.C. § 342(b) and, ir	hat I have informed the debtor(s) about nited States Code, and have explained eligible. I also certify that I have delivered in a case in which § 707(b)(4)(D) applies, ation in the schedules filed with the
	ey, you do not o file this page.	/s/ Ryan Crotty Signature of Attorney	for Debtor	Date	10/3/2016 MM / DD / YYYY
		Ryan P Crotty Printed name			
		Semrad Law Firm Firm name			
		20 S. Clark Street Street			
		28th Floor			
		Chicago		Illinois	60603
		City		State	Zip Code
		Contact phone	3128374032	Email address	rcrotty@semradlaw.com
		6312602		Illino	ois
		Bar number		State	

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 8 of 81

Fill in this information to identify your case:						
Debtor 1	Patricia	Α	Denson			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing	g) First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		Northern	District of Illinois			
Case number (If known)			(State)			

П	Check if this is ar
	amended filing

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets	
	Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$45,083.33
1b. Copy line 62, Total personal property, from Schedule A/B	\$10,700.00
1c. Copy line 63, Total of all property on Schedule A/B	\$55,783.33
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	\$23,281.20
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$16,471.28
Your total liabilities	\$39,752.48
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$2,149.00
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22, Column A, of Schedule J	\$1,399.00

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 9 of 81

Del	otor 1	Patricia	Α	Denson	Case n	umber (if known)	
		First Name	Middle Name	Last Name			
Par	t 4:	Answer These Questions	for Administra	tive and Statistical R	ecords		
6. A	re yo	u filing for bankruptcy under C	Chapters 7, 11, or 1	3?			
		o. You have nothing to report on the	his part of the form. (Check this box and submit th	is form to the co	urt with your other schedule	9 S.
	✓ Ye	es.					
7. V	Vhat k	kind of debt do you have?					
		our debts are primarily consunumily, or household purpose. 11 U.					
	_	our debts are not primarily con is form to the court with your othe		have nothing to report on this	s part of the form	n. Check this box and subm	it
8.		the Statement of Your Currer 122A-1 Line 11; OR , Form 122B	•	,,,,	onthly income fro	m Official	\$897.24
9.	Сор	by the following special categor	ries of claims from	Part 4, line 6 of Schedule	E/F:		
	From	m Part 4 on Schedule E/F, copy	the following:			Total claim	
	9a. [Domestic support obligations (Co	py line 6a.)			\$0.00	
	9b. 7	Taxes and certain other debts you	owe the government	. (Copy line 6b.)		\$0.00	
	9c. C	Claims for death or personal injury	while you were into	xicated. (Copy line 6c.)		\$0.00	
	9d. S	Student loans. (Copy line 6f.)				\$2,876.48	
		Obligations arising out of a separa	ation agreement or d	ivorce that you did not repor	t as	\$0.00	
	•	Debts to pension or profit-sharing	plans, and other sim	ilar debts. (Copy line 6h.)		\$0.00	
	9a. •	Total. Add lines 9a through 9f.			Ī	\$2 876 48	

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 10 of 81

Fill in this in	formation to identify your cas	se:			
Debtor 1	Patricia	A	Denson		
	First Name	Middle Name	Last Name		
ebtor 2			_		
pouse, if f	filing) First Name	Middle Name	Last Name		
nited State	es Bankruptcy Court for the:	Northern	District of Illinois		
	, ,		(State)		
ase numb known)	er				
Kilowilj					Check if this is an
fficial	Form 106A/B				amended filing
chod	ule A/B: Prop	ortv			4
			et only once. If an asset fits in more than		1
ite your n	ame and case number (if k	known). Answer every que	s needed, attach a separate sheet to this estion. or Other Real Estate You Own o		
	, ,	quitable interest in any res	sidence, building, land, or similar proper	ty?	
	No. Go to Part 2				
✓ Y	Yes. Where is the property?				
			is the property? Check all that apply.		claims or exemptions. Put ed claims on <i>Schedule D</i>
1.1	Street address, if available, o	or other description —	ngle-family home		aims Secured by Proper
	1738 Hovland Ct Number Street		uplex or multi-unit building ondominium or cooperative	Current value of the	Current value of the
_	Number Officer	<u> </u>	anufactured or mobile home	entire property? \$180333.33	portion you own? \$45083.33
E	Evanston Illinois	60201 Lai		φ100333.33	φ40003.33
	City State	7in Carla	vestment property	Describe the nature of	
C	Cook	<u></u> ⊤ir	meshare	interest (such as fee s the entireties, or a life	
7	County	Ot	her	Homestead	,
		Who hone.	has an interest in the property? Check		mmunity property
		L D€	ebtor 1 only	_	
		☐ De	ebtor 2 only		
		☐ De	ebtor 1 and Debtor 2 only		
		✓ At	least one of the debtors and another		
lf vou ou	um ar baya maya than ana liga	prope	information you wish to add about this rty identification number: 10-13-117-092		
ii you ow	vn or have more than one, list		is the property? Check all that apply.	Do not deduct secured of	claims or exemptions. Put
1.2 _		Sir	ngle-family home	the amount of any secur	ed claims on <i>Schedule D</i>
5	Street address, if available, o	or other description	uplex or multi-unit building	Creditors Who Have Cl	aims Secured by Proper
_		<u> </u>	ondominium or cooperative	Current value of the	Current value of the
_			anufactured or mobile home	entire property?	portion you own?

Official Form 106A/B Schedule A/B: Property page 1

Debtor 1 and Debtor 2 only

Who has an interest in the property? Check

At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

Investment property

Timeshare

Debtor 1 only
Debtor 2 only

Describe the nature of your ownership

interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

(see instructions)

Check if this is community property

Number

City

Street

State

Zip Code

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 11 of 81

Debtor 1	Patricia First Name	A Middle Name	Denson Last Name	Case number	(if known)	
	net address, if available, or ot		What is the property? Check all that app Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other	oly.		cd claims on Schedule D: nims Secured by Property. Current value of the portion you own? your ownership mple, tenancy by
]]]	Who has an interest in the property? (Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add aboroperty identification number:	r	Check if this is considered (see instructions)	mmunity property
			all of your entries from Part 1, including			83.33
Do you o vyou own th	at someone else drives. If youngs, trucks, tractors, sport util	equitable interest i u lease a vehicle, als	in any vehicles, whether they are regis so report it on Schedule G: Executory Con ycles			
	Make Model: Year:	Nissan Versa 2014	Who has an interest in the proper one. Debtor 1 only	ty? Check	the amount of any secure	laims or exemptions. Put ed claims on Schedule D: naims Secured by Property.
	Approximate mileage: Other information: 2014 Nissan Versa	38000	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and and Check if this is community pro		Current value of the entire property? \$9450.00	Current value of the portion you own? \$9450.00
3.2	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the proper one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and an	•	the amount of any secure	laims or exemptions. Put ed claims on Schedule D: nims Secured by Property. Current value of the portion you own?
			Check if this is community pro			

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 12 of 81

Debtor 1	Patricia First Name	A Middle Name	Denson Last Name	Case number	(if known)	
3.3	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a Check if this is communit instructions)	nd another	the amount of any se	ed claims or exemptions. Put cured claims on Schedule D: e Claims Secured by Property. Current value of the portion you own?
Exa		es, ATVs and other i	Who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors at Check if this is community instructions) Cecreational vehicles, other veshing vessels, snowmobiles, more	nd another y property (see chicles, and acces	the amount of any se Creditors Who Have Current value of th entire property? sories	ed claims or exemptions. Put cured claims on Schedule D: e Claims Secured by Property. Current value of the portion you own?
4.1	No Yes Make		Who has an interest in the pr	roperty? Check	Do not deduct secure	ed claims or exemptions. Put
	Model: Year: Approximate mileage:		one. Debtor 1 only		•	cured claims on Schedule D: Claims Secured by Property.
	Other information:		Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a Check if this is communit instructions)		Current value of the entire property?	ne Current value of the portion you own?
4.2	Make Model: Year:		Who has an interest in the prone. Debtor 1 only	roperty? Check	the amount of any se	ed claims or exemptions. Put cured claims on Schedule D: claims Secured by Property.
	Approximate mileage: Other information:		Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a		Current value of the entire property?	Current value of the portion you own?
			Check if this is communit instructions)		_	
		-	f your entries from Part 2, inc			\$9450.00

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 13 of 81

D	ebtor 1		A	Denson	Case number (if known)	
		First Name	Middle Name	Last Name		
Pa	art 3:	Describe \	Your Personal and House	ehold Items		
D	o you	own or h	ave any legal or equitab	le interest in any of the fo	ollowing items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6	. Hous	ehold goods	s and furnishings			
П	Examp No	les: Major app	oliances, furniture, linens, china, k	itchenware		
✓	Yes. D	escribe	Used Furniture and Household (Goods		\$500.00
			s and radios; audio, video, sterec	o, and digital equipment; computers	s, printers, scanners; music	
빌	No -					
⊻	Yes. D	escribe	Used Home Electronics and Cel	l Phone		\$350.00
		•	and figurines; paintings, prints, or	other artwork; books, pictures, or other collections, memorabilia, coll	•	_
✓	No					
	Yes. D	escribe				
		les: Sports, pl	norts and hobbies notographic, exercise, and other h	nobby equipment; bicycles, pool tak	bles, golf clubs, skis; canoes	
~	No					
П	Yes. D	escribe				
	•					
	0. Firea		fles, shotguns, ammunition, and re	elated equipment		
$ lap{\checkmark}$	No					
	Yes. D	escribe				
	4 01-4	h				
	1. Clot Examp		clothes, furs, leather coats, desig	ner wear, shoes, accessories		
П	No .	, ,				
	Yes. D	escribe	Used Clothing			\$250.00
						\$250.00
	2. Jewe Exampl	•		nent rings, wedding rings, heirloor	m jewelry, watches, gems,	
片		escribe	Used Costume Jewelry			Φ450.00
	1 .00. 5		2334 Cocidino domony			\$150.00
		-farm anima les: Dogs, cat	ls ts, birds, horses			
✓	No					
	Yes. D	escribe				
	_	other persor	nal and household items you d	lid not already list, including an	y health aids you did not list	
✓	No					
	Yes. D	escribe				
			alue of all of your entries from number here	Part 3, including any entries for	r pages you have attached	\$1250.00

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 14 of 81

Der	First Name	Middle Name	Last Name	Case number (# known)	
Part		Financial Assets	Last Name		
			terest in any of the follow	ring?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	Cash				·
	☑ No	ve in your wallet, in your home, in a	safe deposit box, and on hand whe	en you file your petition	
				Cash:	
17.			s; certificates of deposit; shares in counts with the same institution, list		
	Yes		Institution name:		
		17.1. Checking account:			
		17.2. Checking account:			
		17.3. Savings account:			
		17.4. Savings account:			
		17.5. Certificates of deposit:			
		17.6. Other financial account:			
		17.7. Other financial account:			
		17.8. Other financial account:	-		-
		17.9. Other financial account:			-
18.	Bonds, mutual funds	, or publicly traded stocks			
	Examples: Bond funds,	investment accounts with brokerage	ge firms, money market accounts		
	✓ No	Institution or issuer name:			
	Yes Yes				
19.	an LLC, partnership,		ated and unincorporated busing	esses, including an interest in	
	✓ No	Name of entity		% of ownership:	
	Yes. Give specific information about them				

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 15 of 81

Deb	tor 1	Patricia	A	Denson	Case number (if known)	
		First Name	Middle Name	Last Name		
20.	Neg Nor	otiable instruments ir	orate bonds and other negoti nclude personal checks, cashiers nts are those you cannot transfer	checks, promissory notes,	and money orders.	
		Yes. Give specific information about them	Issuer name:			
21.		irement or pension mples: Interests in IR), thrift savings accounts, or	other pension or profit-sharing plans	
	✓	No	Tarantanana	Languaga		
		Yes. List each account	Type of account: 401(k) or similar plan:	Institution name:		
		separately.	Pension plan:			•
			IRA:			
			Retirement account:			
			Keogh:			
			Additional account:			
			Additional account:			•
22.	You Exa	mples: Agreements of the same	orepayments deposits you have made so that you with landlords, prepaid rent, publ			
		No		msuluion name.		
	ш	Yes	Electric: Gas:			
			Heating oil:			
			Security deposit on rental unit:			
			Prepaid rent:			
			Telephone:			·
			Water:			•
			Rented furniture:			·
			Other:			
23.	Anr	•	a periodic payment of money to	you, either for life or for a nu	mber of years)	
		No Yes	Issuer name and description:			
						•

Official Form 106A/B Schedule A/B: Property page 6

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 16 of 81

Debt	or 1 Patricia First Name	A Middle N	lame	Denson Last Name	Case number (if known)	
24.	Interests in an		ount in a qualifie		under a qualified state tuition program	•
	√ No	.,,,	, ,			
	Yes	nstitution name and descripti	ion. Separately file	the records of any inte	rests.11 U.S.C. § 521(c):	
	-					
	_					
25.	Trusts, equitable exercisable for		roperty (other th	an anything listed in	line 1), and rights or powers	
	✓ No					-
	Yes. Descri	be				
26.		ights, trademarks, trade s				
	—	et domain names, websites	, proceeds from ro	yalties and licensing a	greements	
	✓ No Yes. Descri	be				
27.		chises, and other general ing permits, exclusive licens		ssociation holdings, lic	uor licenses, professional licenses	
	✓ No					
	Yes. Descri	be				
Mor	ney or proper	ty owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
	Tax refunds ow					portion you own? Do not deduct secured
	Tax refunds ow	ed to you			Federal:	portion you own? Do not deduct secured
	Tax refunds owe ✓ No ☐ Yes. Give sp about t				Federal: State:	portion you own? Do not deduct secured claims or exemptions.
	Tax refunds own No Yes. Give sp about t you alm	ed to you ecific information hem, including whether				portion you own? Do not deduct secured claims or exemptions. \$0.00
28.	Tax refunds own No Yes. Give sp about t you alr and the	ed to you ecific information hem, including whether eady filed the returns e tax years	ousal support, chilo	d support, maintenance	State:	portion you own? Do not deduct secured claims or exemptions. \$0.00
28.	Tax refunds own No Yes. Give sp about t you alr and the	ed to you ecific information hem, including whether eady filed the returns e tax years	ousal support, child	d support, maintenance	State: Local: , divorce settlement, property settlement	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds own ✓ No Yes. Give sp about to you alroand the Family support Examples: Past do ✓ No	ed to you ecific information hem, including whether eady filed the returns e tax years	ousal support, child	d support, maintenance	State: Local: , divorce settlement, property settlement Alimony:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds own ✓ No Yes. Give sp about to you alroand the Family support Examples: Past do ✓ No	ed to you ecific information hem, including whether eady filed the returns e tax years	ousal support, child	d support, maintenance	State: Local: , divorce settlement, property settlement Alimony: Maintenance:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds own ✓ No Yes. Give sp about to you alroand the Family support Examples: Past do ✓ No	ed to you ecific information hem, including whether eady filed the returns e tax years	ousal support, child	d support, maintenance	State: Local: , divorce settlement, property settlement Alimony: Maintenance: Support:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds own ✓ No Yes. Give sp about to you alroand the Family support Examples: Past do ✓ No	ed to you ecific information hem, including whether eady filed the returns e tax years	ousal support, child	d support, maintenance	State: Local: , divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement:	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds own ✓ No Yes. Give sp about to you alrow and the Family support Examples: Past do ✓ No Yes. Give sp	ed to you ecific information hem, including whether eady filed the returns e tax years	ousal support, child	d support, maintenance	State: Local: , divorce settlement, property settlement Alimony: Maintenance: Support:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds own ✓ No ☐ Yes. Give sp about t you alm and the Family support Examples: Past d ✓ No ☐ Yes. Give sp Other amounts Examples: Unpair	ed to you ecific information hem, including whether eady filed the returns e tax years	e payments, disabi	ility benefits, sick pay, v	State: Local: , divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement:	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds own ✓ No Yes. Give sp about t you alm and the Family support Examples: Past d ✓ No Yes. Give sp Other amounts Examples: Unpai Socia	ecific information hem, including whether eady filed the returns e tax years ue or lump sum alimony, sponecific information	e payments, disabi	ility benefits, sick pay, v	State: Local: , divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds own ✓ No ☐ Yes. Give sp about t you alroand the Family support Examples: Past d ✓ No ☐ Yes. Give sp Other amounts Examples: Unpair Socia	ecific information hem, including whether eady filed the returns e tax years ue or lump sum alimony, sponecific information	e payments, disabi	ility benefits, sick pay, v	State: Local: , divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 17 of 81

Deb	otor 1 Patricia	A	Denson	Case number (if known)	
	First Name	Middle Name	Last Name		
31.	Interests in insurance policies Examples: Health, disability, or life insu	urance; health savin	gs account (HSA); credit, h	omeowner's, or renter's insurance	
	□ No	Compai	ny name:	Beneficiary:	Surrender or refund value:
	✓ Yes. Name the insurance company of each policy and list its value		Whole Life Insurance		\$0.00
	o. eas peney and not no raide	<u> </u>	THIS IS THE THE TANK		
				<u></u>	
32.	Any interest in property that is due If you are the beneficiary of a living trus property because someone has died.			or are currently entitled to receive	
	✓ No				
	Yes. Describe				
33.	Claims against third parties, wheth Examples: Accidents, employment dis			demand for payment	
	Yes. Describe				
	Tes. Describe				
34.	Other contingent and unliquidated	claims of every n	ature, including countered	claims of the debtor and rights	
	to set off claims				
	✓ No				
	Yes. Describe				
35.	Any financial assets you did not alro	eady list			
	✓ No				
	Yes. Describe				
00	Add the dellar release of all of comme	untata a farana Band A	to the their consensation for		
36.	Add the dollar value of all of your effor Part 4. Write that number here				
	1011 art 4. Write that number here				
Part	15: Describe Any Rusiness-R	Palated Propert	v You Own or Have a	an Interest In. List any real estate	in Part 1
	Do you own or have any legal or ed	•	•	·	iii i ait i.
57.	_	juitable interest in	any business-related prop	•	Current value of the
	No. Go to Part 6.				ortion you own?
	Yes. Go to line 38.				Do not deduct secured claims
00				C	or exemptions
38.	Accounts receivable or commission	ns you already earr	iea		
	✓ No				
	Yes. Describe				
30	Office equipment, furnishings, and	l supplies			
JJ.			s, printers, copiers, fax mad	hines, rugs, telephones, desks, chairs, electro	onic devices
	. No		-		
	Yes. Describe				

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 18 of 81

Deb	tor 1	Patricia	A Middle News	Denson	Case number (if known)	
40.	Mad	First Name chinerv. fixtures. eq	Middle Name	Last Name use in business, and tools of	vour trade	
	V	No	,а.р.но.н, с ар рное уса		,	
	Ħ	Yes. Describe				7
41.	Inv	entory				
	V	No				
	Ħ	Yes. Describe				1
42.	Inte	erests in partnersh	ips or joint ventures			
. <u>-</u> -		No	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	П	Yes. Give specific		Name of entity:	% of ownership:	
		information about				
		them				
43. (Cust	omer lists, mailing	lists, or other compilat	ions		
	✓	No				
		Yes. Do your lists in	clude personally identifial	ole information (as defined in 11	U.S.C. § 101(41A))?	
		□ No				
		Yes. Descr	ibe			
44	Λm	, business related r	proporty you did not alre	andy list		
44.		-	property you did not alre	eady list		
		No Vac Civa appoiria				
	Ш	Yes. Give specific information				
45. A	dd tl	he dollar value of a	II of your entries from F	Part 5, including any entries fo	or pages you have attached	
			-			
Part	t 6:	Describe Any F If you own or have ar	Farm- and Commer interest in farmland, list it	cial Fishing-Related Pro in Part 1.	perty You Own or Have an Interes	t In.
46.	Do	you own or have a	ny legal or equitable in	erest in any farm- or commer	cial fishing-related property?	
	✓	No. Go to Part 7.				Current value of the portion you own?
		Yes. Go to line 47.				Do not deduct secured
						claims or exemptions
47.	Far	rm animals				2. 2
	Exa	amples: Livestock, por	ultry, farm-raised fish			
	✓	No				
		Yes. Describe				

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 19 of 81

	tor 1 Patricia A First Name A Middle Name	Denson Last Name	Case number (if known)	
48.	Crops-either growing or harvested	Last Name		
٦٥.				
	✓ No			
	Yes. Describe			
			<u> </u>	
49.	Farm and fishing equipment, implements, machine	ery, fixtures, and tools of trad	e	
	✓ No			
	Yes. Describe			
50.	Farm and fishing supplies, chemicals, and feed			
50.	_			
	✓ No			
	Yes. Describe			
51.	Any farm- and commercial fishing-related property	you did not already list		
	✓ No			
	Yes. Describe			
	dd the dollar value of all of your entries from Part 6, art 6. Write that number here			
101 1 6	art of write that humber here			
Part	7: Describe All Property You Own or Have	o an Interest in That Vo	u Did Not List Abovo	
	Do you have other property of any kind you did not		7 DIG NOT LIST ABOVE	
00.	Examples: Season tickets, country club membership	uncudy list.		
	✓ No			
	Yes. Give specific			
	information			
	momadon			
	Inciniation			
54. A	dd the dollar value of all of your entries from Part 7.	Write that number here	>	
54. A		Write that number here		
54. A		Write that number here	>	
54. Ad	dd the dollar value of all of your entries from Part 7.		 ▶	
Part	dd the dollar value of all of your entries from Part 7. 8: List the Totals of Each Part of this For	m		\$45083.33
Part	dd the dollar value of all of your entries from Part 7.	m		\$45083.33
Part 55. F	dd the dollar value of all of your entries from Part 7. 8: List the Totals of Each Part of this For	'm		\$45083.33
Part 55. F 56. p	dd the dollar value of all of your entries from Part 7. 8: List the Totals of Each Part of this Foreart 1: Total real estate, line 2	*m \$9450.00		\$45083.33
55. F 56. p 57.P	8: List the Totals of Each Part of this For Part 1: Total real estate, line 2	'm		\$45083.33
55. F 56. p 57.P	dd the dollar value of all of your entries from Part 7. 8: List the Totals of Each Part of this For Part 1: Total real estate, line 2	*m \$9450.00		\$45083.33
Part 55. F 56. p 57.P 58.P 59. F	dd the dollar value of all of your entries from Part 7. 8: List the Totals of Each Part of this For Part 1: Total real estate, line 2 part 2 total vehicles, line 5 art 3: Total personal and household items, line 15 art 4: Total financial assets, line 36 Part 5: Total business-related property, line 45	\$9450.00 \$1250.00		\$45083.33
Part 55. F 56. p 57.P 58.P 59. F 60. F	8: List the Totals of Each Part of this For Part 1: Total real estate, line 2	\$9450.00 \$1250.00		\$45083.33
Part 55. F 56. p 57.P 58.P 59. F 60. F	dd the dollar value of all of your entries from Part 7. 8: List the Totals of Each Part of this For Part 1: Total real estate, line 2 part 2 total vehicles, line 5 art 3: Total personal and household items, line 15 art 4: Total financial assets, line 36 Part 5: Total business-related property, line 45	\$9450.00 \$1250.00		\$45083.33
Part 55. F 56. p 57.P 58.P 60. F 61. F	8: List the Totals of Each Part of this For Part 1: Total real estate, line 2	\$9450.00 \$1250.00	>	\$45083.33 +\$10700.00
Part 55. F 56. p 57.P 58.P 60. F 61. F	8: List the Totals of Each Part of this For Part 1: Total real estate, line 2	\$9450.00 \$1250.00		
Part 55. F 56. p 57.P 58.P 60. F 61. F	8: List the Totals of Each Part of this For Part 1: Total real estate, line 2	\$9450.00 \$1250.00	>	

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 20 of 81

Fill in this information to identify your case:					
Debtor 1	Patricia First Name	A Middle Name	Denson Last Name		
Debtor 2		Middle Name	Last Name		
(Spouse, if filing	g) First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for the:	Northern	District of Illinois (State)		
Case number (If known)	_		(Class)		

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

correct

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Par	Part 1: Identify the Property You Claim as Exempt						
1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. ✓ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ✓ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) For any property you list on Schedule A/B that you claim as exempt, fill in the information below.						
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption			
	Brief description: 10-13-117-092-0000 Line from Schedule A/B: 01	\$45,083.33	\$15,000.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-901			
	Brief description: Used Clothing Line from Schedule A/B: 11	\$250.00	\$250.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a)			
3.	Are you claiming a homestead exemptio (Subject to adjustment on 4/01/19 and every No Yes. Did you acquire the property covere No Yes	3 years after that for ca					

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 21 of 81

Debtor 1		A	Denson	Case number (if known)	
	First Name	Middle Name	Last Name		
art 2:	Additional Page				
line	ef description of the property on Schedule A/B that lists tl perty			e exemption you claim e box for each exemption.	Specific laws that allow exemption
Brie	f				735 ILCS 5/12-1001(b)
Line	Used Costume Jewelry from edule A/B: 12	<u>\$150.00</u>		\$150.00 ir market value, up to any statutory limit	-
Brie	f				735 ILCS 5/12-1001(b)
desc	cription:	\$500.00	✓	\$500.00	
	Used Furniture and Household Goods			ir market value, up to any statutory limit	-
	from edule A/B:06		арріісаые	Statutory in the	
Brie	f cription:	\$350.00	7		735 ILCS 5/12-1001(b)
	Used Home Electronics		<u> </u>	\$350.00	_
	and Cell Phone			ir market value, up to any	
	e from edule A/B: 07		applicable	statutory limit	
Brie			_		735 ILCS 5/12-1001(f)
	cription:	\$0.00	✓	\$0	
	Allstate Whole Life Insurance			ir market value, up to any	-
	from		арріісаріе	statutory limit	

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 22 of 81

Fill in	this information to identify your case	:				
Debt	or 1 Patricia	А	Denson			
	First Name	Middle Name	Last Name			
Debt						
(Spot	use, if filing) First Name	Middle Name	Last Name			
Unite	ed States Bankruptcy Court for the:	Northern	District of Illinois			
Case	e number		(State)			
(If kno						
Off	icial Form 106D				<u> </u>	Check if this is a
		oro Who Hov	a Claima Sagur	ad by Dra		amended filing
	hedule D: Credit					12/1
	complete and accurate as possib is needed, copy the Additional Pa					
•	ase number (if known).	age, min tout, number the c		. On the top of uny	additional pages, with	c your name
1.	Do any creditors have claims secu	red by your property?				
	No. Check this box and submit the	nis form to the court with your	other schedules. You have nothing	else to report on this f	orm.	
	Yes. Fill in all of the information by	pelow.				
Part	1: List All Secured Claims					
2.	List all secured claims. If a credito	r has more than one secured	claim, list the creditor separately	Column A	Column B	Column C
	for each claim. If more than one cre			Amount of claim	Value of	Unsecured
	much as possible, list the claims in	alphabetical order according	to the creditor's name.	Do not deduct the	collateral	portion
				value of collateral.	that supports this claim	If any
2.1	Cook County Treasurer			\$3,560.19	\$180,333.33	\$0.00
	Creditor's Name 118 N. Clark St. Room 112	Describe the property that	t secures the claim:			
	Number Street	Property Tax Lien				
	Property Tax		e claim is: Check all that apply.			
	Chicago Illinois 60602	Contingent				
	City State ZIP Code Who owes the debt? Check one.	Unliquidated				
	✓ Debtor 1 only	Disputed	ot annly			
	Debtor 2 only	Nature of lien. Check all the	,			
	Debtor 1 and Debtor 2 only	car loan)	de (such as mortgage or secured			
	At least one of the debtors and another	✓ Statutory lien (such as	tax lien, mechanic's lien)			
	Check if this claim relates	Judgment lien from a la	awsuit			
	to a community debt Date debt was	Other (including a right	to offset)			
	incurred	Last 4 digits of account i	number			
2.2	Peritus Portfolio Services II, LLC	.		\$19,721.01	\$9,450.00	\$10,271.01
	Creditor's Name PO Box 141419	Describe the property that	t secures the claim:			
	Number Street	Auto Loan	e claim is: Check all that apply.			
		Contingent	e Claim is. Check all that apply.			
	Irving Texas 75014 City State ZIP Code	Unliquidated				
	Who owes the debt? Check one.	Disputed				
	Debtor 1 only	Nature of lien. Check all the	nat apply.			
	Debtor 2 only	_	de (such as mortgage or secured			
	Debtor 1 and Debtor 2 only	car loan)	,			
	At least one of the debtors and another	Statutory lien (such as	tax lien, mechanic's lien)			
	Check if this claim relates	Judgment lien from a la				
	to a community debt Date debt was	Other (including a right	to offset)			
	incurred	Last 4 digits of account i	number			
	Add the dollar value of y number here:	your entries in Column A o	n this page. Write that	\$23,281.20		

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 23 of 81

Debtor 1 Part 2:	Patricia First Name List Others to Be No	A Middle Name otified for a Debt T	Denson Last Name That You Already L	Case number (if known)
agency you ha	is trying to collect from	you for a debt you owe or for any of the debts	to someone else, list that you listed in Part	for a debt that you already listed in Part 1. For example, if a collection the creditor in Part 1, and then list the collection agency here. Similarly, if 1, list the additional creditors here. If you do not have additional page.
Nan	POC: Janiscia Jackson PC) Box 961245		On which line in Part 1 did you enter the creditor? 2.2 Last 4 digits of account number
Fort			6161 in Code	

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 24 of 81

Fill	in this inform	ation to identify your cas	se:					
De	btor 1	Patricia	Α	Denson				
		First Name	Middle Name	Last Name	_			
	btor 2 ouse, if filing	First Name	Middle Name	Last Name	_			
(0)	ouse, ir ming	Filst Name	Middle Name	Lastiname				
Un	ited States Ba	ankruptcy Court for the:	Northern	District of Illinois	=			
Ca	se number			(State)				
(If k	(nown)							
Of	ficial Fo	orm 106E/F				Ch	neck if this is ar	n amended filing
S	hadu	In F/F: Cro	ditors Who	Have Unsecur	enicl ha			
<u> </u>	SHEUU	ile L/I . Cie	CUITOLO ANTIO	Have OHSecul	eu Ciaiiiis			12/15
part 106/ that entr	y to any exe A/B) and on are listed in	cutory contracts or un Schedule G: Executor Schedule D: Creditor	expired leases that could by Contracts and Unexpire s Who Hold Claims Secu	ors with PRIORITY claims and I result in a claim. Also list exect deficial Form 106G). Ared by Property. If more space this page. On the top of any and the space of this page.	utory contracts on Sch Do not include any cre is needed, copy the Pa	edule A/B editors witl art you nee	: Property (O h partially sed ed, fill it out, r	fficial Form cured claims number the
Pai	t1: List A	All of Your PRIORI	TY Unsecured Claims	S				
1.	Do any cre	editors have priority ur	nsecured claims against y	ou?				
	✓ No. G	o to Part 2.						
	Yes.							
2.	listed, ident much as po Continuation	ify what type of claim it is ossible, list the claims in on Page of Part 1. If more	s. If a claim has both priority a alphabetical order according e than one creditor holds a p	nore than one priority unsecured of and nonpriority amounts, list that of the creditor's name. If you have particular claim, list the other cred or this form in the instruction book	claim here and show both re more than two priority itors in Part 3.	n priority and	d nonpriority a	mounts. As
						Total	Priority	Nonpriority

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 25 of 81

Debto		enson Case number (if known)	
Part 2	List All of Your NONPRIORITY Unsecured Claim	ns	
3.	Do any creditors have nonpriority unsecured claims against yo	ou?	
1	No. You have nothing to report in this part. Submit this form to the	ne court with your other schedules.	
1	✓ Yes.		
4. I	List all of your nonpriority unsecured claims in the alphabetic	al order of the creditor who holds each claim. If a creditor has more t	han one priority
		n claim listed, identify what type of claim it is. Do not list claims already in	
	•	ors in Part 3.If you have more than four priority unsecured claims fill out t	he Continuation
ı	Page of Part 2.		
			Total claim
4.1	American Fur Mart	Last 4 digits of account number	\$345.00
	Nonpriority Creditor's Name 5309 Touhy Ave	When was the debt incurred? n/a	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Skokie Illinois 60077	Unliquidated	
	City State Zip Code Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another	that you did not report as priority claims	
	님	Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt	debts ✓ Other. Specify Coat Storage	
	Is the claim subject to offset?	Other. Specify Ocat Glorage	
	✓ No		
	Yes		
4.2	AmeriCash Loans Corporate	Last 4 digits of account number	\$710.61
	Nonpriority Creditor's Name PO Box 184	When was the debt incurred? n/a	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	Des Plaines Illinois 60016	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another	that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar	
	Is the claim subject to offset?	debts ✓ Other. Specify Payday Loan	
	✓ No	✓ Other. Specify Payday Loan	
	Yes		
4.3	AT&T Mobility II LLC	Last 4 digits of account number	\$1,338.07
	Nonpriority Creditor's Name		
	One AT&T Way Room 3A104 Number Street	When was the debt incurred?n/a	
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Bedminster New Jersey 07921	Unliquidated	
	City State Zip Code	Disputed	
	Who incurred the debt? Check one. Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	<u>'</u>	Student loans	
	Debtor 2 only	Obligations arising out of a separation agreement or divorce	
	Debtor 1 and Debtor 2 only	that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt	debts	
	Is the claim subject to offset?	✓ Other. Specify Phone Bill	
	✓ No		
	Yes		

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 26 of 81

tor 1 Patricia A First Name Middle Name	Denson Case number (if known) Last Name	
2: Your NONPRIORITY Unsecured Claims		
	m beginning with 4.5, followed by 4.6, and so forth.	Total claim
Blue Cross Blue Shield	Look & Botto of account number	\$1.00
Nonpriority Creditor's Name	Last 4 digits of account number	Ψ1.00
PO Box 7344 Number Street	When was the debt incurred?n/a	
Nambol Street	As of the date you file, the claim is: Check all that apply.	
China and Militaria COCCO	Contingent	
Chicago Illinois 60680 City State Zip Co		
Who incurred the debt? Check one.	Disputed	
Debtor 1 only	Type of NONPRIORITY unsecured claim:	
Debtor 2 only	Student loans	
Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
At least one of the debtors and another	that you did not report as priority claims	
Check if this claim relates to a community del		
Is the claim subject to offset?	debts Other Specify Notice Only	
✓ No	Other. Specify Notice Only	
Yes		
Bradley S Ross	Last 4 digits of account number	\$1.00
Nonpriority Creditor's Name 7126 N Lincoln Ave		
Number Street		
	As of the date you file, the claim is: Check all that apply.	
	Contingent	
Lincolnwood Illinois 60712		
City State Zip Co Who incurred the debt? Check one.	ode Disputed	
Debtor 1 only	Type of NONPRIORITY unsecured claim:	
Debtor 2 only	Student loans	
Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
At least one of the debtors and another	that you did not report as priority claims	
Check if this claim relates to a community del	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	Other. Specify Notice Only	
No		
☐ Yes		
Cigna Health Spring		£4.00
Nonpriority Creditor's Name	Last 4 digits of account number	\$1.00
PO Box 20012	When was the debt incurred?n/a	
Number Street	As of the date you file, the claim is: Check all that apply.	
-	Contingent	
Nashville Tennessee 37202	The state of	
City State Zip Co		
Who incurred the debt? Check one. Debtor 1 only	Type of NONPRIORITY unsecured claim:	
<u>'</u>	Student loans	
Debtor 2 only		
Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar	
Check if this claim relates to a community del		
Is the claim subject to offset?	Other. Specify Notice Only	
✓ No		
Yes		

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 27 of 81

Debto	or 1 Patricia A First Name Middle Name	Denson Case number (if known) Last Name	
Part 2	Your NONPRIORITY Unsecured Claims - Cont	tinuation Page	
	After listing any entries on this page, number them beginn	ing with 4.5, followed by 4.6, and so forth.	Total claim
4.7	City of Chicago Parking	Last 4 digits of account number	\$3,430.80
	Nonpriority Creditor's Name 121 N. LaSalle St # 107A		
	Number Street	When was the dept incurred:	
		As of the date you file, the claim is: Check all that apply.	
	Chicago Illinois 60602	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	Disputed	
	<u> </u>	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another	that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify Parking Tickets	
	✓ No		
	Yes		
4.8	Comcast	Last 4 digits of account number	\$177.00
	Nonpriority Creditor's Name 11621 E. Marginal Way # 5		
	Number Street		
	Bankruptcy Dept	As of the date you file, the claim is: Check all that apply.	
	Seattle Washington 98168	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
	H	that you did not report as priority claims	
	Check if this claim relates to a community debt	 Debts to pension or profit-sharing plans, and other similar debts 	
	Is the claim subject to offset?	Other. Specify Cable Bill	
	✓ No	_	
	☐ Yes		
4.9	Community Consolidated School District 59 Nonpriority Creditor's Name	Last 4 digits of account number	\$55.00
	2123 S Arlington Heights Rd	When was the debt incurred?	
	Number Street	As of the date you file the plain in Check all that apply	
		As of the date you file, the claim is: Check all that apply. Contingent	
		H	
	Arlington Hts Illinois 60005 City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another	that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify	
	No		
	Yes		
	—		

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 28 of 81

Debtor		nson Case number (if known)	
	First Name Middle Name Las	t Name	
Part 2:	Your NONPRIORITY Unsecured Claims - Continu	uation Page	
r art z.			
	After listing any entries on this page, number them beginning	g with 4.5, followed by 4.6, and so forth.	Total claim
4.10	Cook County State's Attorney's Bad Check Restitution Program		\$390.00
7.10	Nonpriority Creditor's Name	- Last 4 digits of account number	Ψ000.00
	Po Box A3984	When was the debt incurred? n/a	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Chicago Illinois 60600	Unliquidated	
	ChicagoIllinois60690CityStateZip Code	- =	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
		Student loans	
	Debtor 2 only		
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another	that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt	debts	
	Is the claim subject to offset?	✓ Other. Specify Bad Checks	
	✓ No		
	=		
	Yes		
4.11	DirecTV	- Last 4 digits of account number	\$350.00
	Nonpriority Creditor's Name	Last 4 digits of account number	
	2230 E Imperial Hwy	When was the debt incurred?n/a	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	ATTN Bankruptcy		
	El Segundo California 90245	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only		
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	<u> </u>	Student loans	
	Debtor 1 and Debtor 2 only	Obligations original out of a constration agreement or diverse	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Charle if the alains relates to a community dabt		
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify Cable Bill	
	✓ No	Other. Opeciny	
	Yes		
	<u> </u>		
4.12	FIRST BANK & TRUST	- Last 4 digits of account number	\$450.00
	Nonpriority Creditor's Name 820 CHURCH ST	When was the debt incurred?	
	Number Street	When was the debt incurred?n/a	
	Trained Crook	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	EVANSTON Illinois 60201	H	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only		
	Debtor 1 and Debtor 2 only	Student loans	
		Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another	that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar	
	Is the claim subject to offset?	debts	
	No	✓ Other. Specify NSF	
	T INO		
	Yes		

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 29 of 81

Debtor	1 Patricia A		Denson Case number (if known)	
		ddle Name	Last Name	
Part 2:	Your NONPRIORITY Unsecu	ured Claims - Con	tinuation Page	
	After listing any entries on this pag	e, number them begin	nning with 4.5, followed by 4.6, and so forth.	Total claim
4.13	FIRST PREMIER BANK Nonpriority Creditor's Name		Last 4 digits of account number	\$425.00
	Jefferson Capital Systems, LLC PO Bo	x 7999	When was the debt incurred? 7/1/2012	
	Number Street c/o Kelly Lukason		As of the date you file, the claim is: Check all that apply.	
		50000	Contingent	
	Saint Cloud Minnesota City State	56302 Zip Code	Unliquidated	
	Who incurred the debt? Check one Debtor 1 only	·	Disputed	
	Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only		Student loans	
	At least one of the debtors and and	other	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a ls the claim subject to offset?	community debt	Debts to pension or profit-sharing plans, and other similar debts	
	No		✓ Other. Specify CreditCard	
	Yes			
4.14	GLC Financial		Look 4 dinite of account mumber	\$1.00
	Nonpriority Creditor's Name 3200 Nw 62nd Ave # 203		Last 4 digits of account number When was the debt incurred? n/a	
	Number Street			
			As of the date you file, the claim is: Check all that apply. Contingent	
	Manuel	00000	Unliquidated	
	Margate Florida City State	33063 Zip Code	Disputed	
	Who incurred the debt? Check one Debtor 1 only		Type of NONPRIORITY unsecured claim:	
	Debtor 2 only		Student loans	
	Debtor 1 and Debtor 2 only		Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and and	other	that you did not report as priority claims	
	Check if this claim relates to a		Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	community debt	Other. Specify Notice Only	
	✓ No			
	Yes			
4.15	IDES		Last 4 digits of account number	\$1.00
	Nonpriority Creditor's Name P O Box 4385		When was the debt incurred?n/a	
	Number Street		As of the date you file, the claim is: Check all that apply.	
	Benefit Payment Control Division		Contingent	
	Chicago Illinois City State	60680 Zip Code	Unliquidated	
	Who incurred the debt? Check one	•	Disputed	
	Debtor 1 only Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	Debtor 2 only Debtor 1 and Debtor 2 only		Student loans	
	At least one of the debtors and and	other	Obligations arising out of a separation agreement or divorce	
	Check if this claim relates to a		that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar	
	Is the claim subject to offset?	oonmanity acot	debts	
	✓ No		✓ Other. Specify Notice Only	
	Yes			

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 30 of 81

Debtor		Denson Case number (if known)	
		Last Name	
Part 2:	Your NONPRIORITY Unsecured Claims - Conti	nuation Page	
	After listing any entries on this page, number them beginn	ling with 4.5, followed by 4.6, and so forth.	Total claim
4.16	Illinois Tollway Nonpriority Creditor's Name	Last 4 digits of account number	\$86.80
	2700 Ogdén Ave	When was the debt incurred?n/a	
	Number Street Legal Dept	As of the date you file, the claim is: Check all that apply.	
	Downers Grove Illinois 60515	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset? No	✓ Other. Specify Tollway Ticket	
	Yes	_	
4.17	JPMORGAN CHASE BANK		\$525.00
617	Nonpriority Creditor's Name	Last 4 digits of account number	ψ020.00
	2000 MARCUS AVENUE Number Street	When was the debt incurred?	
		As of the date you file, the claim is: Check all that apply.	
	NEW HYDE PARK New York 11042	Contingent Unliquidated	
	City State Zip Code Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt Is the claim subject to offset?	debts	
	No	Other. Specify NSF	
	Yes		
4.18	Northshore Hospital	Last 4 digits of account number	\$1.00
	Nonpriority Creditor's Name 2650 Ridge Ave.	When was the debt incurred?n/a	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Evanston Illinois 60201	Unliquidated	
	City State Zip Code Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt	debts ✓ Other. Specify Notice Only	
	Is the claim subject to offset? No	TOURS OF THE PROPERTY OF THE P	
	Yes		

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 31 of 81

Debtor 1		enson Case number (if known)	
lové O	Í		
	Your NONPRIORITY Unsecured Claims - Contin		Total claim
	PEOPLES ENGY	g,	
	Nonpriority Creditor's Name	Last 4 digits of account number 5475	\$97.06
	200 EAST RANDOLPH	When was the debt incurred? 6/1/2009	
ı	Number Street	As of the date you file, the claim is: Check all that apply.	
-		Contingent	
_	CHICAGO Illinois 60601		
	City State Zip Code	Unliquidated	
, i	Who incurred the debt? Check one. ✓ Debtor 1 only	Disputed	
ř	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
H	Debtor 1 and Debtor 2 only	Student loans	
Ļ	<u>'</u>	Obligations arising out of a separation agreement or divorce	
L	At least one of the debtors and another	that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar	
_	s the claim subject to offset?	debts ✓ Other. Specify InstallmentLoan	
	✓ No	ThistaillientLoan	
	Yes		
.20 F	Peter G Chioros DPM		\$39.52
N	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ00.02
_	600 W Lake Cook Rd Ste 160 Number Street	When was the debt incurred?n/a	
r	Number Street	As of the date you file, the claim is: Check all that apply.	
-		Contingent	
_	Puffalo Crovo Illinoia 60090	Unliquidated	
_	Buffalo Grove Illinois 60089 City State Zip Code	_ Disputed	
Ň	Who incurred the debt? Check one.	<u> </u>	
[Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
Ī	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Ī	At least one of the debtors and another	that you did not report as priority claims	
ř		Debts to pension or profit-sharing plans, and other similar debts	
L	Check if this claim relates to a community debt	Other. Specify Notice Only	
	s the claim subject to offset? ✓ No		
Ľ	=		
L	Yes		
	PLS Financial Solutions of Illinois, Inc.	Last 4 digits of account number	\$900.00
	Nonpriority Creditor's Name 800 Jorie Blvd.	When was the debt incurred? n/a	
	Number Street	<u> </u>	
		As of the date you file, the claim is: Check all that apply.	
_		Contingent	
<u>C</u>	Dak Brook Illinois 60523	Unliquidated	
	City State Zip Code	Disputed	
	Who incurred the debt? Check one. ✓ Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
Ļ	=		
Ĺ	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt	debts	
Ī:	s the claim subject to offset?	Other. Specify Title Loan	
[✓ No		
Ī	Yes		

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 32 of 81

Debtor		nson Case number (if known)	
	First Name Middle Name Last	t Name	
Part 2:	Your NONPRIORITY Unsecured Claims - Continu	uation Page	
	After listing any entries on this page, number them beginning	•	Total claim
4.22	PROF CREDIT	- Local A digita of account number 4420	\$282.00
	Nonpriority Creditor's Name 2892 CRESCENT AVE	 Last 4 digits of account number 4439 When was the debt incurred? 12/1/2010 	
	Number Street	As of the date were file the plains in Cheel all that our he	
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
	EUGENE Oregon 97408	Unliquidated	
	City State Zip Code	Disputed	
	Who incurred the debt? Check one. Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another	that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ 001 Collection; Collecting for	
	✓ No	ORIGINAL CREDITOR: 01 Other. Specify CONSUMER CELLULAR	
	Yes		
4.23	RECOVERY ONE LLC	- Last 4 digits of account number 9357	\$357.00
	Nonpriority Creditor's Name 3240 HENDERSON RD	When was the debt incurred? 8/1/2015	
	Number Street	-	
		As of the date you file, the claim is: Check all that apply.	
	COLUMBUS Ohio 43220	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar	
	Is the claim subject to offset?	debts	
	✓ No	001 Collection; Collecting for ORIGINAL CREDITOR: IGS	
	Yes	Other. Specify <u>ENERGY</u>	
4.24	SEVENTH AVENUE Nonpriority Creditor's Name	- Last 4 digits of account number	\$467.44
	1112 7TH AVE	When was the debt incurred? 9/1/2012	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	MONROE Wisconsin 53566	Unliquidated	
	City State Zip Code Who incurred the debt? Check one.	Disputed	
	Debtor 1 only		
	Debtor 2 only	Type of NONPRIORITY unsecured claim: Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another	that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify <u>CreditCard</u>	
	✓ No	Sales opening Steament	
	Yes		

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 33 of 81

Debtor		Denson Case number (if known)	
		Last Name	
Part 2:			
	After listing any entries on this page, number them beginn	ing with 4.5, followed by 4.6, and so forth.	Total claim
4.25	SPRINGLEAF FINANCIAL S Nonpriority Creditor's Name	Last 4 digits of account number 5785	\$2,811.50
	PO BOX 3251	When was the debt incurred? 12/1/2011	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	c/o SARAH A. HOFFMAN	Contingent	
	Evansville Indiana 47731 City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another	that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify 025 InstallmentLoan	
	✓ No		
	Yes		
4.26	Terminex Nonpriority Creditor's Name	Last 4 digits of account number	\$1.00
	860 Ridge Lake Blvd	When was the debt incurred?n/a	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	MemphisTennessee38120CityStateZip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another	that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify Notice Only	
	Yes	_	
4.07			
4.27	United Student Aid Funds, Inc. Nonpriority Creditor's Name	Last 4 digits of account number	\$2,876.48
	PO Box 9460	When was the debt incurred?n/a	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	Wilkes Barre Pennsylvania 18773	Contingent	
	Wilkes Barre Pennsylvania 18773 City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only Debtor 1 and Debtor 2 only	✓ Student loans	
	<u>'</u>	Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another	that you did not report as priority claims	
	Check if this claim relates to a community debt	 Debts to pension or profit-sharing plans, and other similar debts 	
	Is the claim subject to offset?	Other. Specify	
	Yes		

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 34 of 81

Debtor 1	Patricia	Α	Denson	Case number (if known)				
	First Name	Middle Name	Last Name					
Part 2:	Your NONPRIORITY U	Jnsecured Claims -	· Continuation Page					
	After listing any entries on t	this page, number them	beginning with 4.5, follo	owed by 4.6, and so forth.	Total claim			
	Village of Skokie		Last 4 digits	s of account number	\$350.00			
5	Nonpriority Creditor's Name 5127 Oakton Street		When was t	the debt incurred? n/a				
ſ	Number Street		As of the da	te you file, the claim is: Check all that apply.				
	Skokie Illir	nois 60077	Continge	ent				
	City Sta		le Unliquid	lated				
Y	Who incurred the debt? Ch ✓ Debtor 1 only	o incurred the debt? Check one.	Disputed	d				
ļ	≟ ′		Type of NON	NPRIORITY unsecured claim:				
ļ	Debtor 2 only		Student I	loans				
[Debtor 1 and Debtor 2 on	ly	=		ivoroo			
	At least one of the debtors	and another		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts 				
	Check if this claim relat	es to a community deb	t Debts to debts					
Ī	s the claim subject to offse	et?		specify Parking Tickets				
	✓ No		Other. 5	pooliy raining florets				
	Yes							

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 35 of 81

Debtor 1	Patricia	A	Denson	Case number (if known)	
	First Name	Middle Name	Last Name		

Part 3: List Others to Be Notified About a Debt That You Already Listed

						submit this page.
Jefferson Capital Syst	tems LLC		On which entry	in Part 1 or Par	t 2 did	you list the original creditor?
name			·			-
PO Box 7999 Number Street			Line 4.13	of (Check one):	✓	Part 1: Creditors with Priority Unsecured Claim Part 2: Creditors with Nonpriority Unsecured Claims
Saint Cloud City	Minnesota State	56302 Zip Code	Last 4 digits of	account number	er	Ciairis
	Oldio	Zip Godo				
IGS Energy Name			On which entry	in Part 1 or Par	t 2 did	you list the original creditor?
C100 Emerald Plans			Line 4.23	of (Check	П	Part 1: Creditors with Priority Unsecured Clair
6100 Emerald Pkwy Number Street				one):	V	Part 2: Creditors with Nonpriority Unsecured Claims
Dublin	Ohio	43016	 Last 4 digits of	account number	er	9357
City	State	Zip Code		associat Humb		<u></u>
Consumer Cellular		·				
Name			On which entry	On which entry in Part 1 or Part 2 did you list the original creditor?		
PO Box 7175			Line 4.22	of (Check	П	Part 1: Creditors with Priority Unsecured Clair
Number Street			<u> </u>	one):	✓	Part 2: Creditors with Nonpriority Unsecured Claims
Pasadena	California	91109	Last 4 digits of	account number	er	4439
City	State	Zip Code				
SWISS COLONY INC						
Name			On which entry	in Part 1 or Par	t 2 did	you list the original creditor?
1112 7TH AVE			Line 4.24	of (Check		Part 1: Creditors with Priority Unsecured Clair
Number Street			- -	one):	✓	Part 2: Creditors with Nonpriority Unsecured Claims
MONROE	Wisconsin	53566	Last 4 digits of	account number	er	
City	State	Zip Code	_			
CACH LLC				la Bart 1 E		the state of the s
Name			On which entry	in Part 1 or Par	t 2 did	you list the original creditor?
4340 S Monaco St Fl	2		Line 4.25	of (Check		Part 1: Creditors with Priority Unsecured Clair
Number Street			_	one):	✓	Part 2: Creditors with Nonpriority Unsecured Claims
Denver	Colorado	80237	Last 4 digits of	account number	er	5785
City	State	Zip Code				
Linebarger Goggan E Name	Blair & Sampson L	LP	On which entry	in Part 1 or Par	t 2 did	you list the original creditor?
2700 Via Fortuna Dr	, Ste 400		Line 4.7	of (Check		Part 1: Creditors with Priority Unsecured Clair
Number Street			_	one):	✓	Part 2: Creditors with Nonpriority Unsecured Claims
Austin	Texas	78746	Last 4 digits of	account number	er	
City	State	Zip Code				
Arnold Scott Harris P	C					
Name			On which entry	in Part 1 or Par	t 2 did	you list the original creditor?
111 W Jackson # 600			Line 4.7	of (Check		Part 1: Creditors with Priority Unsecured Clair
Number Street				one):	✓	Part 2: Creditors with Nonpriority Unsecured Claims
Chicago	Illinois	60604	l act 4 digite of	account number	er	
Jinuagu	State		Last 4 digits of /F: Creditors Who I			

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 36 of 81

Patricia Denson Debtor 1 Case number (if known) First Name Last Name List Others to Be Notified About a Debt That You Already Listed Part 3: Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. ENHANCED RECOVERY CORP On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.3 of (Check Part 1: Creditors with Priority Unsecured Claims 8014 BAYBERRY RD one): Number Street Part 2: Creditors with Nonpriority Unsecured **JACKSONVILLE** Florida 32256 Last 4 digits of account number City State Zip Code ER Solutions/Convergent Outsourcing, INC On which entry in Part 1 or Part 2 did you list the original creditor? Name Line 4.8 of (Check Part 1: Creditors with Priority Unsecured Claims Po Box 9004 one): Number Street Part 2: Creditors with Nonpriority Unsecured Renton Washington 98057 Last 4 digits of account number City State Zip Code Navient On which entry in Part 1 or Part 2 did you list the original creditor? Name of (Check Line 4.27 Part 1: Creditors with Priority Unsecured Claims 1002 ARTHUR DR one): Number Street Part 2: Creditors with Nonpriority Unsecured LYNN HAVEN Florida 32444 Last 4 digits of account number City State Zip Code

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 37 of 81

Patricia Denson Debtor 1 Case number (if known) First Name Last Name Add the Amounts for Each Type of Unsecured Claim Part 4: Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 **Total claims** 6a. Domestic support obligations. from Part 1 \$0.00 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were \$0.00 intoxicated \$0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. \$0.00 6e. Total. Add lines 6a through 6d. 6e. **Total claims** \$2,876.48 **Total claims** 6f. Student loans from Part 2 \$0.00 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar 6h. \$13,594.80 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. \$16,471.28 6j. Total. Add lines 6f through 6i.

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 38 of 81

Fill in this information to identify your case:					
Debtor 1	Patricia	Α	Denson		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing) First Name		Middle Name	Last Name	_	
United States Bankruptcy Court for the:		Northern	District of Illinois		
			(State)		
Case number (If known)					

Of	ficia	ıl Fc	rm	10)6G

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 39 of 81

- ::::::::::::::::::::::::::::::::::::				
Fill in this info	rmation to identify your c	ase:		
Debtor 1	Patricia	Α	Denson	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if fili	^{ng)} First Name	Middle Name	Last Name	
United States	Bankruptcy Court for the	: Northern	District of Illinois	
	, ,		(State)	_
Case number				_
(If known)				
				Check if this is ar amended filing
Official	Form 106H			amended ming
Official	Form 106H			
Schedu	ile H: Your C	Codebtors		12/15
			B	plete and accurate as possible. If two married people are filing
Answer every	question.			dditional Pages, write your name and case number (if known).
1. Do you h	· ·	you are filing a joint case, do	not list either spouse as a code	btor.)
Idaho, Lo No.	uisiana, Nevada, New Me Go to line 3.	u lived in a community propexico, Puerto Rico, Texas, Was	shington, and Wisconsin.)	nmunity property states and territories include Arizona, California,
	Yes. In which community	y state or territory did you live?	Fill in the	ne name and current address of that person.
	Name of your spouse	, former spouse, or legal equiv	ralent	-
	Number Street			-
	City	State	Zip Code	-
again as	a codebtor only if that	person is a guarantor or co	signer. Make sure you have	Ir spouse is filing with you. List the person shown in line 2 listed the creditor on <i>Schedule D</i> (Official Form 106D), e.D, <i>Schedule E/F</i> , or <i>Schedule G</i> to fill out Column 2.

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Official Form 106H Schedule H: Your Codebtors page 1

Column 1: Your codebtor

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 40 of 81

Fill in this	information to identify	y your case:						
Debtor 1	Patricia	А	Denson		_			
Dalutano	First Name	Middle Name	Last Nam	е		Check if this is:		
Debtor 2 (Spouse, if fil	ling) First Name	Middle Name	Last Nam	<u> </u>	_	An amended filing		
	s Bankruptcy Court for the:	Northern	District of Illinoi		_	A supplement show expenses as of the		
Case number (If known)	r		(State	=)	-	MM / DD / YYYY		
Official	Form 106I							
Sched	ule I: Your Ind	come						12/15
include inf additional	formation about you	about your spouse. I r spouse. If more spa ame and case numbe	ice is needed,	attach a s	separate she	eet to this form. O		
1. F	ill in your employment		Debtor 1			Debtor 2		
ir	nformation.	Employment status	✓ Employed			Employed		
jo	you have more than one		Not Emplo	oyed		Not Employed		
	ttach a separate page with formation about additional	Occupation				_		
eı	mployers.	Employer's name	City of Evansto	on				
OI	nclude part time, seasonal, r elf-employed work.	Employer's address	2100 Ridge Av Number Street	/enue		Number Street		
	Occupation may include					_		
OI	r homemaker, if it applies.		Evanston City	Illinois State	60201 Zip Code	City	State	Zip Code
		How long employed there?					_	
Estimate m you are sept If you or you attach a sep 2. List m	arated. ur non-filing spouse have mo parate sheet to this form. nonthly gross wages, salar	Monthly Income date you file this form. If you one than one employer, combinery, and commissions (befor alculate what the monthly wag	ine the information re all payroll 2.	for all employe				
3. Estima	ate and list monthly over	time pay.	3.		+ \$0.00			

4. Calculate gross income. Add line 2 + line 3.

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 41 of 81

Debtor 1 Patricia A	Densor		Case number	(if known)	
First Name Middle N	Name Last Na	ame	For Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here		4.	\$925.93		
5. List all payroll deductions:					
5a. Tax, Medicare, and Social Security deduc	tions	5a.	\$138.93		
5b. Mandatory contributions for retirement		5b.	\$0.00		
5c. Voluntary contributions for retirement p	•	5c.	\$0.00		
5d. Required repayments of retirement fund		5d.	\$0.00		
5e. Insurance	iodiio	5e.	\$0.00		
5f. Domestic support obligations		5f.	\$0.00	<u></u>	
5g. Union dues		5g.	\$0.00		
5h. Other deductions. Specify:		5g. 5h. +	\$0.00 +		
, , ,					
6. Add the payroll deductions. Add lines 5a + 5b +5h.	+ 5C + 50 + 5e +5i + 5g	6.	\$138.93		
7. Calculate total monthly take-home pay. Subtra	act line 6 from line 4.	7.	\$787.00		
8. List all other income regularly received:					
8a. Net income from rental property and fro business, profession, or farm Attach a statement for each property and bus receipts, ordinary and necessary business ex	siness showing gross				
monthly net income.	perises, and the total	8a.	\$0.00		
8b. Interest and dividends		8b.	\$0.00		
8c. Family support payments that you, a nor dependent regularly receive Include alimony, spousal support, child support			#0.00		
divorce settlement, and property settlement.		8c.	\$0.00		
8d. Unemployment compensation		8d.	\$0.00		
8e. Social Security		8e.	\$1,362.00		
8f. Other government assistance that you re Include cash assistance and the value (if know assistance that you receive, such as food star the Supplemental Nutrition Assistance Progr subsidies Specify:	vn) of any non-cash nps (benefits under am) or housing	O.F	\$0.00		
		8f.	\$0.00		
8g. Pension or retirement income		8g.	\$0.00		
8h. Other monthly income. Specify:		8h. +	\$0.00 +		
9. Add all other income Add lines 8a + 8b + 8c +	8d + 8e + 8t +8g + 8h.	9.	\$1,362.00		
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debto		10.	\$2,149.00 +	=	\$2,149.00
State all other regular contributions to the electric line in lin	members of your househol	d, your depe	ndents, your roommates		
Specify:				11	. + \$0.00
					_
12. Add the amount in the last column of line 1 Write that amount on the Summary of Schedules					\$2,149.00
					Combined monthly income
13. Do you expect an increase or decrease with	n the year after you file t	his form?			
No.					
Yes. Explain:					
1					

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 42 of 81

Fill in this inform	nation to identify your c	ase:				
Debtor 1	Patricia	А	Denson			
Dobtor 1	First Name	Middle Name	Last Name			
Debtor 2				Check if this is:		
(Spouse, if filing) First Name	Middle Name	Last Name	An amended filing	j	
United States B	ankruptcy Court for the	: Northern	District of Illinois (State)	A supplement sho	owing post-petition of	chapter 13
Case number			()	0.pon.000 ao 0. a.	o rono mg dato.	
(If known)				MM / DD / YYYY		
Official F	Form 106J					
	e J: Your E	ynenses				12/1
		-				12/1
			e filing together, both are equally form. On the top of any addition			ber
(if known). Answ	wer every question.		, ,			
Part 1: Desc	ribe Your House	hold				
1. Is this a join	t case?					
✓ No. Go	to line 2					
Yes. Do	es Debtor 2 live in a	separate household?				
	No					
Г	Tyes. Debtor 2 must	file Official Forms 106J-2. Expens	ses for Separate Household of Deb	tor 2.		
2. Do you have		No	<u>, </u>			
dependents?	ت ر					
Do not list De Debtor 2.		Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does depender with you?	nt live
3. Do your exp		No				
than		Yes				
yourself and dependents						
Part 2: Estin	nate Your Ongoin	g Monthly Expenses				
	f a date after the ban		ou are using this form as a sup plemental Schedule J, check the			,
		n-cash government assistance			Vour	avnancas
		d it on Schedule I: Your Income	•		Tour	expenses
	or home ownership entry the ground or lot. 4.	xpenses for your residence. Ind	clude first mortgage payments and		4.	\$0.00
If not inclu	uded in line 4:					
4a. Real es	tate taxes				4a	\$100.00
4b. Propert	y, homeowner's, or ren	ter's insurance			4b	\$22.00
4c. Home n	naintenance, repair, and	d upkeep expenses			4c	\$0.00
4d. Homeo	wner's association or c	ondominium dues			4d.	\$0.00

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 43 of 81

Debtor 1 Patricia First Name	A Middle Name	Denson Last Name	Case number (if known)		
					Your expenses
5. Additional mortgage payme	ents for your residence, suc	ch as home equity loans		5.	\$0.00
6. Utilities:					
6a. Electricity, heat, natural of	gas			6a.	\$108.00
6b. Water, sewer, garbage of	collection			6b.	\$0.00
6c. Telephone, cell phone, In	nternet, satellite, and cable ser	vices		6c.	\$140.00
6d. Other. Specify:				6d	\$0.00
7. Food and housekeeping se	upplies			7.	\$350.00
8. Childcare and children's ed	ducation costs			8.	\$0.00
9. Clothing, laundry, and dry	cleaning			9.	\$100.00
10. Personal care products ar	nd services			10.	\$150.00
11. Medical and dental expens	ses			11.	\$100.00
12. Transportation. Include ga Do not include car payment		are.		12.	\$107.00
13. Entertainment, clubs, recr	reation, newspapers, magaz	zines, and books		13.	\$0.00
14. Charitable contributions	and religious donations			14.	\$0.00
15. Insurance. Do not include insurance dec	ducted from your pay or includ	led in lines 4 or 20.			
15a. Life insurance				15a	\$110.00
15b. Health insurance				15b	\$0.00
15c. Vehicle insurance				15c	\$112.00
15d. Other insurance. Specif	ý:			15d	\$0.00
16. Taxes. Do not include taxes Specify:	deducted from your pay or inc				\$0.00
				16	
17. Installment or lease payments17a. Car payments for Vehic					40.00
				17a	\$0.00
17b. Car payments for Vehic	de 2			17b	\$0.00
17c. Other. Specify:				17c	\$0.00
17d. Other. Specify:				17d	\$0.00
18. Your payments of alimony your pay on line 5, Sched	y, maintenance, and supportule I, Your Income (Official		deducted from	18.	\$0.00
19. Other payments you make	e to support others who do	not live with you.			
Specify:				19.	\$0.00
20.Other real property expens		or 5 of this form or on Scheo	lule I: Your Income.		
20a. Mortgages on other pro	operty			20a	\$0.00
20b. Real estate taxes.				20b	\$0.00
20c. Property, homeowner's,				20c	\$0.00
20d. Maintenance, repair, and				20d	\$0.00
20e. Homeowner's association	on or condominium dues			20e	\$0.00

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 44 of 81

Debtor 1	Patricia	Α	Denson	Case number (if known)					
	First Name	Middle Name	Last Name						
21.Other	. Specify:				21	\$0.00			
22. Calcu	late your monthly expense	es.				\$1,399.00			
22a. <i>A</i>	22a. Add lines 4 through 21.								
22b. C	Copy line 22 (monthly expens	ses for Debtor 2), if any, fro	m Official Form 106J-2			\$1,399.00			
22c. A	dd line 22a and 22b. The res	sult is your monthly expens	ses.		22.				
23.Calcu	late your monthly net inco	ome.							
23a. C	Copy line 12 (your combined r	monthly income) from Sch	edule I.		23a	\$2,149.00			
23b. C	Copy your monthly expenses f	rom line 22 above.			23b	\$1,399.00			
23c S	Subtract your monthly expense	es from vour monthly incor	me						
	The result is your monthly ne	•	110.		23c	\$750.00			
24. Do y o	ou expect an increase or de	ecrease in your expense	es within the year after you	ı file this form?					
	example, do you expect to fini								
mort	gage payment to increase or	decrease because of a m	nodification to the terms of yo	our mortgage?					
✓ 1	No								
	′es								
	Explain here:								

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 45 of 81

Fill in this information to identify your case:							
Debtor 1	Patricia	Α	Denson				
ı	First Name	Middle Name	Last Name	'			
Debtor 2							
(Spouse, if filing) First Name		Middle Name	Last Name				
United States Bankruptcy Court for the:		Northern	District of Illinois	_			
Case number (If known)			(State)	_			

Official Form 106Dec

Check if this is a
amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	t1: Sign Below						
	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?						
	✓ No						
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).					
	Under penalty of perjury, I declare that I have read the summary a	nd schedules filed with this declaration and					
	that they are true and correct.	a seriodules med with this declaration and					
×	/s/ Patricia Denson	×					
	Signature of Debtor 1	Signature of Debtor 2					
	Date 10/3/2016	Date					
	MM/DD/YYYY	MM/DD/YYYY					

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 46 of 81

Fill in this information to identify your case:						
Debtor 1	Patricia First Name	A Middle Name	Denson Last Name	_		
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name	_		
United States Bankruptcy Court for the:		Northern	District of Illinois			
Case number (If known)			(State)	_		

Official Form 107

Check if this is an amended filing

Statement of Financial Affairs for Individuals Filing for Bankruptcy

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part	1: 0	Give Details /	About You	r Marital Statu	s and Where You Liv	ed Before			
1.	Wha	at is your curre	ent marital st	tatus?					
	✓	Married Not married							
2.	Dur	ing the last 3 ye	ears, have yo	ou lived anywhere	other than where you live	now?			
	✓	No Yes. List all of th	ne places you	lived in the last 3 ye	ears. Do not include where yo	ou live now.			
		Debtor 1:			Dates Debtor 1 lived there	Debtor 2:			Dates Debtor 2 lived there
						Same as	Debtor 1		Same as Debtor 1
		Number Street			From	Number Stree	et		From
					To				То
		City	State	Zip Code		City	State	Zip Code	
						Same as	Debtor 1		Same as Debtor 1
		Number Street			From	Number Stree	et .		From
					То				То
		City	State	Zip Code		City	State	Zip Code	
		ries include Arizo			ouse or legal equivalent in , Nevada, New Mexico, Puer				mmunity property states and
			ou fill out Sche	edule H: Your Code	ebtors (Official Form 106H).				

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 47 of 81

Deb	tor 1		Den:		number (if known)	
Dow'	2.	Ī		Name		
	Did Fill i	you have any income from employ n the total amount of income you receivities. If you are filing a joint case and you not see. Fill in the details.	ment or from operating a k	nesses, including part-time	·	ears?
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		rom January 1 of current year until ne date you filed for bankruptcy:	✓ Wages, commissions, bonuses, tips ☐ Operating a business	\$7505.38	Wages, commissions, bonuses, tips Operating a business	
		or last calendar year: lanuary 1 to December 31, 2015	Wages, commissions, bonuses, tips Operating a business	\$8732.00	Wages, commissions, bonuses, tips Operating a business	
		or the calendar year before that: lanuary 1 to December 31, 2014 YYYY	Wages, commissions, bonuses, tips Operating a business	\$9220.00	Wages, commissions, bonuses, tips Operating a business	
I	Inclu bene case	you receive any other income during the income regardless of whether that in stiff payments; pensions; rental income; and you have income that you receive each source and the gross income from No Yes. Fill in the details.	ncome is taxable. Examples interest; dividends; money of d together, list it only once un	of other income are alimony; collected from lawsuits; royalties der Debtor 1.	s; and gambling and lottery winr	
			Debtor 1		Debtor 2	
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
		From January 1 of current year until he date you filed for bankruptcy:	SSI	\$12,258.00		
		For last calendar year: January 1 to December 31, 2015 YYYYY		\$16,344.00		
		For the calendar year before that: January 1 to December 31, 2014 YYYYY	SSI	\$16,344.00		

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 48 of 81

First Name		Middle Name	Last Name		IIIbei (// known)	
List Cert	tain Paymer	nts You Made I	Before You Filed fo	r Bankruptcy		
e either Debt	tor 1's or Debt	or 2's debts prima	arily consumer debts?			
_		-	-	0		
		al, family, or househ	_	. Consumer debts are define	ed in 11 U.S.C. § 101(8) as "ind	curred by an individual
During	the 90 days be	efore you filed for ba	nkruptcy, did you pay any	creditor a total of \$6,425* or	more?	
☐ No	o. Go to line 7.					
☐ Y	total amour	nt you paid that cred	ditor. Do not include paym	25* or more in one or more p ents for domestic support ob to an attorney for this bankr	ligations, such as	
* Subje	ect to adjustmen	nt on 4/01/19 and ev	very 3 years after that for c	ases filed on or after the date	e of adjustment.	
Yes. Debto	r 1 or Debtor 2	2 or both have pri	marily consumer debts	5.		
During	the 90 days be	efore you filed for ba	nkruptcy, did you pay any	creditor a total of \$600 or mo	re?	
✓ No	o. Go to line 7.					
\Box	es. List helow e	each creditor to who	m you paid a total of \$600	or more and the total amour	nt vou paid	
ш.				port obligations, such as chil		
			ayments to an attorney for			
			Dates of re-	Total ame :	Amount vers still some	Mosthis server
			Dates of payment	Total amount paid	Amount you still owe	Was this payment for
On all to the	M					Mortgage
Creditor's N	vame					Car
Number St	reet					Credit card
						Loan repaymer
0::						Suppliers or
City	State	Zip Code				vendors
				· -		Other Mortgage
Creditor's 1	Name					Car
Number St	reet					Credit card
						Loan repaymer
		_				Suppliers or
City	State	Zip Code				vendors
						Other
Creditor's 1	Name			-		☐ Mortgage ☐ Car
Number St	reet					Car Credit card
						Loan repaymer
						Suppliers or
City	State	Zip Code				vendors
						Other

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 49 of 81

ebtor 1	Patricia		Α	De	enson	Case number (if known)
	First Name		Middle Name	Las	st Name		
Insid corp ager	lers include your rel orations of which yo	atives; any ger ou are an office a business you	neral partners r, director, pe	; relatives of any rson in control, or	owner of 20% or mo	tnerships of which y are of their voting se	ho was an insider? you are a general partner; curities; and any managing pmestic support obligations,
✓	No Yes. List all paymer	nts to an inside	r.				
	rees. Elst all paymen	ito to arr iriolae		Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name						
	Number Street						
	City S	state Z	ip Code				
	Insider's Name						
	Number Street						
	City S	state Z	ip Code				
✓	ler? de payments on det No Yes. List all paymen	-	-	oy an insider. Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
							Include creditor's name
	Insider's Name						
	Number Street						
	City S	itate Z	ip Code				
	Insider's Name						
	Number Street						
	City S	state Z	ip Code				
			,				

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 50 of 81

Deb	otor 1	Patricia First Name	A Middle Name		Denson Last Name	C	ase number (if i	known)	
Par	t 4:		Actions, Reposses	sions, an	d Foreclosure	S			
	With List a contr	in 1 year before yo	ou filed for bankruptcy, uding personal injury cas	were you a	party in any lawsı	ıit, court actior			ng? r custody modifications, and
	ш	res. Fill III the detail	ls.	Nature of	the case	Court or a	gency		Status of the case
		Case title				Court Nam			Pending On appeal
		Case number				NumberStr	eet		Concluded
						City	State	Zip Code	
		Case title				Court Nam	e		Pending On appeal
		Case number				NumberStr	eet		Concluded
						City	State	Zip Code	
		No. Go to line 11. Yes. Fill in the info	rmation below.		Describe the prope	erty		Date	Value of the property
		Creditor's Name		E	Explain what happ	ened			
		Number Street City	State Zip Coc	[[de	Property was re Property was fo Property was ga	reclosed. arnished.	or levied.		
					Describe the propo			Date	Value of the property
		Creditor's Name		E	Explain what happ	ened			
		Number Street City	State Zip Coc		Property was re Property was fo Property was ga	reclosed. arnished.	or levied		
			p 000			, 00.200,			

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 51 of 81

Debtor	1	Patricia First Name	A Middle Name	Denson Last Name	Case number (if known)		
		hin 90 days before you filed ounts or refuse to make a p			ank or financial institution, s	set off any amou	nts from your
[[✓	No Yes. Fill in the details.					
				Describe the action the	e creditor took	Date action was taken	Amount
		Creditor's Name					
		Number Street		Last 4 digits of account no	umber: XXXX-		
		City State	Zip Code				
		nin 1 year before you filed f ointed receiver, a custodia		of your property in the p	possession of an assignee for	or the benefit of	creditors, a court-
	Z	No Yes					
Part 5		List Certain Gifts and					
13.	Wi ✓	thin 2 years before you file No	d for bankruptcy, did yc	ou give any gifts with a to	otal value of more than \$600	per person?	
		Yes. Fill in the details for ea					
		Gifts with a total value of per person	more than \$600	Describe the gifts		Dates you gave the gifts	Value
		Person to Whom You Gave t	he Gift				
		Number Street					
		City State Person's relationship to you	Zip Code				
		Person to Whom You Gave t	he Gift				
		Number Street					
		City State Person's relationship to you	Zip Code				

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 52 of 81

Deb	tor 1	Patricia First Name	A Middle Name	Denson Last Name	Case number (if known)	
14.	Wit	hin 2 vears before vou fi	iled for bankruptcy, did	you give any gifts or contrib	outions with a total value o	f more than \$600 t	o any charity?
• ••	V	No	nou ioi banni aptoy, ana	you give any give or contain	anone min a total value o	. moro man pood	o any onany .
	Ħ	Yes. Fill in the details for	each gift or contribution.				
	_	Gifts or contributions that total more than \$6		Describe what you cont	ributed	Date you contributed	Value
				_			
		Charity's Name					
				-			
		Number Street		-			
		City State	e Zip Code	-			
Part	6:	List Certain Losses	i				
	gam	No Yes. Fill in the details. Describe the property how the loss occurred	you lost and	Describe any insurance Include the amount that in pending insurance claims	surance has paid. List	Date of your loss	Value of property lost
				A/B: Property.			
		ut seeking bankruptcy of de any attorneys, bankrup No Yes. Fill in the details.		credit counseling agencies for some credit counseling agencies for counseling		kruptcy. Date payment	Amount of
				transferred		or transfer was made	payment
		Semrad Law Firm		Attorney's Fee - 350.00		9/21/2016	\$350.00
		Person Who Was Paid 20 South Clark Street 28	th Floor				
		Number Street					
		Chicago Illino	is 60606	•			
		City State					
		Email or website address	3				
		Person Who Made the Pa	ayment, if Not You				
		Person Who Was Paid					
		Number Street					
		City State	e Zip Code				
		Email or website address	3				
		Person Who Made the Pa	ayment, if Not You	•			

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 53 of 81

Debtor	· 1 <u>I</u>	Patricia	Α	Denson	Case number (if know	vn)	
	-	First Name	Middle Name	Last Name			
h	elp Oo no	in 1 year before you filed for you deal with your creditors of include any payment or transf	or to make payment	s to your creditors?	our behalf pay or transf	er any property to an	yone who promised to
L		res. I ill ill the details.		Description and value of		Dete	Amount of
				Description and value of transferred	апу ргоретту	Date payment or transfer was made	Amount of payment
		Person Who Was Paid					
		Number Street					
		City State	Zip Code				
		City State	Zip Code				
tr	ansf	de both outright transfers and tr fers that you have already listed No Yes. Fill in the details.		Description and value of		any property or	Date
				property transferred		received or debts p	
		Person Who Received Transfe	r				
		Number Street					
		City State Person's relationship to you	Zip Code				
		Person Who Received Transfe	r				-
		Number Street					
		City State Person's relationship to you	Zip Code				
		in 10 years before you filed f se are often called asset-protec		ou transfer any property to a	a self-settled trust or sir	milar device of which	you are a beneficiary?
<u>[</u>		No Yes. Fill in the details.					
_				Description and value o	f the property transferr	ed	Date transfer was made
		Name of trust					

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 54 of 81

Debte	or 1	Patricia First Name		A Middle Name	Denson Last Name	Case	number (if known)		
Part 8	8:		inancial A		truments, Safe Depos	it Boxes. and	d Storage Units		
					-		_		
		nin 1 year before ved, or transferre		bankruptcy, we	re any financial accounts o	or instruments h	eld in your name, or f	or your benefit, cl	osed, sold,
		ide checking, savir peratives, associati			ancial accounts; certificates o	f deposit; shares	in banks, credit unions,	brokerage houses,	pension funds,
			iono, and othe		iiono.				
		No Yes. Fill in the det	ails.						
					Last 4 digits of accou	nt Type of	account or	Date	Last balance
					number	instrum	nent	account was closed, sold,	before closing or
								moved, or	transfer
		FIRST BANK & 1	TRUST		- XXXX-0000	Ch/	adina	transferred	# 0.00
		Person Who Was			- ^^^-0000		ecking vings	08/2016	\$ 0.00
		820 CHURCH ST	Τ		-		ney market		
					_		kerage		
		EVANSTON	Illinois	60201		Oth	er		
		City	State	Zip Code	-				
		Fifth Third Bank Person Who Was	Poid		- XXXX-0000	✓ Che	ecking	09/2015	\$ 0.00
		8140 S. Ashland A			_	Sav	vings		
		Number Street					ney market		
					_	☐ Bro	kerage er		
		Chicago City	Illinois State	60620	-				
	-	City	State	Zip Code					
		ou now have, or valuables?	did you have	e within 1 year b	pefore you filed for bankrup	otcy, any safe de	posit box or other dep	oository for secur	ities, cash, or
		No Yes. Fill in the det	ails.						
					Who else had access to	it?	Describe the conte	ents	Do you still
									have it?
		Name of Financia	al Institution		Name				No
		Number Street			Number Street				Yes
					City State	Zip Code			
		City	State	Zip Code					
22.	Hav	e you stored prop	perty in a sto	rage unit or pla	ce other than your home w	vithin 1 year befo	ore you filed for bankr	ruptcy?	
	✓	No							
		Yes. Fill in the det	ails.						
					Who else had access to	it?	Describe the conte	ents	Do you still have it?
									_
		Name of Storage	Facility		Name				☐ No ☐ Yes
		Number Street			Number Street				L 163
					City State	Zip Code			
		City	State	Zip Code	, 5.55	,			
		Jity	Jidie	Zip Code					

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 55 of 81

art 9:			
rt 9:	First Name Middle Nar	me Last Name	
_	Identify Property You Hold or C	Control for Someone Else	
		omeone else owns? Include any property you borrowed from, are storing for, or hold i	n trust for
son	neone.		
V	No		
H	Yes. Fill in the details.		
ш	res. I ii iii de details.	Where is the avenuate?	Value
		Where is the property? Describe the contents	Value
	Owner's Name	Number Ctreet	
	Owners name	Number Street	
	Number Street		
	Trainbor Greek		
	-	City State Zip Code	
		City State Zip Code	
	City State Zip Code	e e	
	.		
rt 10:	Give Details About Environme	ntal Information	
or the i	purpose of Part 10, the following definitions	apply:	
	•	e, or local statute or regulation concerning pollution, contamination, releases of	
		naterial into the air, land, soil, surface water, groundwater, or other medium,	
II	ncluding statutes or regulations controlling t	the cleanup of these substances, wastes, or material.	
= 5	Site means any location, facility, or property a	as defined under any environmental law, whether you now own, operate, or utilize it	
C	or used to own, operate, or utilize it, includin	ng disposal sites.	
- /	Hazardous material means anything an envi	ironmental law defines as a hazardous waste, hazardous substance,	
	oxic substance, hazardous material, polluta		
	oxio cubotarico, riazaracao material, politica	and contaminant of circular continu	
eport a	all notices, releases, and proceedings that yo	out know about regardless of when they essurred	
		ou know about, regardless of when they occurred.	
		ou know about, regardless of when they occurred.	
. Has		at you may be liable or potentially liable under or in violation of an environmental law?	
. Has	s any governmental unit notified you tha	,	
. Has	s any governmental unit notified you tha	,	
. Has	s any governmental unit notified you tha	,	
. Has	s any governmental unit notified you tha	,	Date of
. Has	s any governmental unit notified you tha	at you may be liable or potentially liable under or in violation of an environmental law?	
. Has	s any governmental unit notified you that No Yes. Fill in the details.	Governmental unit Environmental law, if you know it	Date of
. Ha:	s any governmental unit notified you tha	at you may be liable or potentially liable under or in violation of an environmental law?	Date of
. Ha:	s any governmental unit notified you that No Yes. Fill in the details. Name of site	Governmental unit Governmental unit Governmental unit Governmental unit	Date of
. Ha:	s any governmental unit notified you that No Yes. Fill in the details.	Governmental unit Environmental law, if you know it	Date of
. Ha:	s any governmental unit notified you that No Yes. Fill in the details. Name of site	Governmental unit Governmental unit Governmental unit Number Street	Date of
. Ha:	s any governmental unit notified you that No Yes. Fill in the details. Name of site	Governmental unit Governmental unit Governmental unit Governmental unit	Date of
. Ha:	s any governmental unit notified you that No Yes. Fill in the details. Name of site Number Street	Governmental unit Governmental unit Governmental unit Governmental unit City State Zip Code	Date of
. Ha:	s any governmental unit notified you that No Yes. Fill in the details. Name of site	Governmental unit Governmental unit Governmental unit Governmental unit City State Zip Code	Date of
	s any governmental unit notified you that No Yes. Fill in the details. Name of site Number Street	Governmental unit Governmental unit Governmental unit Governmental unit City State Zip Code	Date of
	No Yes. Fill in the details. Name of site Number Street City State Zip Code	Governmental unit Governmental unit Governmental unit Governmental unit City State Zip Code	Date of
	No Yes. Fill in the details. Name of site Number Street City State Zip Code ve you notified any governmental unit o	Governmental unit Governmental unit Governmental unit Governmental unit City State Zip Code	Date of
	No Yes. Fill in the details. Name of site Number Street City State Zip Code	Governmental unit Governmental unit Governmental unit Governmental unit City State Zip Code	Date of
	No Yes. Fill in the details. Name of site Number Street City State Zip Code ve you notified any governmental unit o	Governmental unit Governmental unit Governmental unit Governmental unit City State Zip Code	Date of
	No Yes. Fill in the details. Name of site Number Street City State Zip Code ve you notified any governmental unit o	Governmental unit Governmental unit Governmental unit Number Street City State Zip Code of any release of hazardous material?	Date of notice
	No Yes. Fill in the details. Name of site Number Street City State Zip Code ve you notified any governmental unit o	Governmental unit Governmental unit Governmental unit Number Street City State Zip Code of any release of hazardous material?	Date of notice
	No Yes. Fill in the details. Name of site Number Street City State Zip Code ve you notified any governmental unit o	Governmental unit Governmental unit Governmental unit Number Street City State Zip Code of any release of hazardous material?	Date of notice
	No Yes. Fill in the details. Name of site Number Street City State Zip Code ve you notified any governmental unit of No Yes. Fill in the details.	Governmental unit Governmental unit City State Zip Code Governmental unit Governmental unit Environmental law, if you know it Governmental unit Environmental law, if you know it	Date of notice
	No Yes. Fill in the details. Name of site Number Street City State Zip Code ve you notified any governmental unit o No Yes. Fill in the details.	Governmental unit Governmental unit Governmental unit Number Street City State Zip Code Of any release of hazardous material? Environmental law, if you know it Environmental law, if you know it	Date of notice
	No Yes. Fill in the details. Name of site Number Street City State Zip Code ve you notified any governmental unit of No Yes. Fill in the details.	Governmental unit Governmental unit City State Zip Code Governmental unit Governmental unit Environmental law, if you know it Governmental unit Environmental law, if you know it	Date of notice
	No Yes. Fill in the details. Name of site Number Street City State Zip Code ve you notified any governmental unit of No Yes. Fill in the details.	Governmental unit Governmental unit City State Zip Code Governmental unit Governmental unit Environmental law, if you know it Governmental unit Environmental law, if you know it	Date of notice

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 56 of 81

Deb	tor 1	Patricia		Α	Denson	Case	number (if known)	
		First Name		Middle Name	Last Name			
00	11			-1-1	-4!		-	_
26.	Hav	e you been a party	in any judio	cial or administr	ative proceeding under	any environmenta	al law? Include settlements and order	S.
	V	No						
	Ħ	Yes. Fill in the deta	ils.					
					Court or agency		Nature of the case	Status of the
					Court or agency		Nature of the case	case
		Coop title						case
		Case title						Pending
					Court Name			
								On appeal
		Case number			Number Street			Concluded
								Concluded
					City State	Zip Code		
		I						
Part	111:	Give Details A	bout Your	Business or	Connections to Ar	ny Business		
27.	Wit	hin 4 years before	you filed for	bankruptcy, did	l you own a business or	have any of the fo	ollowing connections to any business	5?
		A sole propriet	or or salf-ami	nloved in a trade	profession, or other activit	v either full-time o	r nart-time	
				-			r part-time	
				ity company (LLC) or limited liability partner	ship (LLP)		
		A partner in a	partnership					
		An officer, dire	ctor, or mana	iging executive of	a corporation			
		An owner of at	least 5% of t	he voting or equit	y securities of a corporation	n		
	_	_						
	✓	No. None of the abo						
		Yes. Check all that	apply above a	and fill in the detai	ls below for each business	i.		
					Describe the natu	re of the busines	Employer Identification n	umber Do not
							include Social Security no	
							EINI:	
		Business Name					EIN:	
		Number Street			_		Dates business existed	
					Name of account	ant or bookkeepe	er	
		City	Ctoto	Zin Codo			From To	
		City	State	Zip Code				
					Describe the natu	re of the busines	s Employer Identification n	umber Do not
							include Social Security no	
							EINI.	
		Business Name					EIN:	
		Number Street			_		Dates business existed	
		Trainibol Otroot			Name of account	ant or bookkeepe	er	
		0::	0	7: 0 1	_		From To	
		City	State	Zip Code			11610	
					Describe the natu	ire of the husines	Employer Identification n	umber Do not
					Describe trie riatt	ire or the busines	include Social Security no	
		Business Name			_		EIN:	
		Dusiness Ingline						
					_		Dates business existed	
		Number Street			Name of account	ant or bookkeene		
		City	State	Zip Code			From To	

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 57 of 81

Debtor	1 Patricia	А	Denson	Case number (if known)
	First Name	Middle Name	Last Name	
	Vithin 2 years before you reditors, or other parties		ou give a financial statemen	t to anyone about your business? Include all financial institutions,
	No Yes. Fill in the details be	elow.		
			Date issued	
	Name		MM/DD/YYYY	
	Number Street		<u> </u>	
	City	State Zip Code	_	
Part 12	2: Sign Below			
tru	e and correct. I understa	and that making a false sta	atement, concealing property	ts, and I declare under penalty of perjury that the answers are gor obtaining money or property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
	★ /s/ Patr	icia Denson		×
	Signature of			Signature of Debtor 2
	Date 10/3	/2016		Date
Die	d you attach additional p	ages to Your Statement o	f Financial Affairs for Individ	uals Filing for Bankruptcy (Official Form 107)?
✓	No			
	Yes			
Die	d you pay or agree to pay	someone who is not an a	attorney to help you fill out ba	inkruptcy forms?
✓	No			
	Yes. Name of person			Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes:
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft:
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form — the Chapter 7 Means Test Calculation (Official Form 122A–2). The calculations on the form— sometimes called the Means Test —deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$275	total fee
+	\$75	administrative fee
	\$200	filing fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 62 of 81

B 203 (12/94)

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re	Patricia A Denson	Case No.				
-	Debtor		(If known)			
		Chapter _	Chapter 13			
	DISCLOSURE OF COMPE	ENSATION OF ATTORNE	Y FOR DEBTOR			
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr that compensation paid to me within one year I services rendered or to be rendered on behalf is as follows:	pefore the filing of the petition in bankrupto	cy, or agreed to be paid to me, for			
	For legal services, I have agreed to accept		\$4,000.0			
	Prior to the filing of this statement I have rece	ived	\$350.0			
	Balance Due		\$3,650.0			
2.	The source of the compensation paid to me wa	s:				
	✓ Debtor	Other (specify)				
3.	The source of the compensation paid to me is:					
	Debtor	Other (specify)				
4.	I have not agreed to share the above-discl members and associates of my law firm.	osed compensation with any other person	unless they are			
	I have agreed to share the above-disclosed members or associates of my law firm. A the people sharing in the compensation, is	copy of the agreement, together with a lis				
5.	In return for the above-disclosed fee, I have ag a. Analysis of the debtor's financial situation bankruptcy;	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·			
	b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;					
	c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;					
	d. Representation of the debtor in adversa	ry proceedings and other contested bankr	ruptcy matters;			
6.	By agreement with the debtor(s), the above-dis	closed fee does not include the following	services:			
		CERTIFICATION				
	I certify that the foregoing is a complete statement the debtor(s) in this bankruptcy proceedings.	ent of any agreement or arrangement for p	payment to me for representation			
	10/3/2016	/s/ Ryan Crotty				
	Date	Signature of Attorney				
		Semrad Law Firm				
		Name of law firm				

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 63 of 81

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Denson, Patricia A	Case No	Case No				
_	Debtor(s)						
		Chapter.	Chapter13				
	VERIFICATION OF CREDITOR MATRIX						
	The above named Debtors hereby verify tha	t the attached list of creditors is true a	and correct to the best of their	knowledge.			
Date:	10/3/2016	/s/ Denson, Patrici	a A				
_		Denson, Patricia A					
		Signature of Debto	r				

FIRST PREMIER BANK PO Box 7999 c/o Stephen Dirksen Saint Cloud , MN 56302 USA

Jefferson Capital Systems LLC PO Box 7999 c/o Kelly Lukason Saint Cloud , MN 56302 USA

RECOVERY ONE LLC 3240 HENDERSON RD COLUMBUS, OH 43220 USA

IGS Energy 6100 Emerald Pkwy Dublin , OH 43016 USA

PROF CREDIT 2892 CRESCENT AVE EUGENE , OR 97408 USA

Consumer Cellular PO Box 7175 Pasadena , CA 91109 USA

SEVENTH AVENUE 1112 7TH AVE MONROE , WI 53566 USA

SWISS COLONY INC 1112 7TH AVE MONROE , WI 53566 USA

SPRINGLEAF FINANCIAL S PO Box 3251 c/o MELISSA S. FRYMIRE Evansville , IN 47731 USA

CACH LLC c/o Meseret Fitsum PO Box 5980 Denver , CO 80217 USA

PEOPLES ENGY 200 EAST RANDOLPH CHICAGO , IL 60601 USA

Cook County Treasurer 118 N. Clark St. Room 112 Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 65 of 81

Property Tax Chicago , IL 60602 USA FIRST BANK & TRUST 820 CHURCH ST EVANSTON , IL 60201 USA

American Fur Mart 5309 Touhy Ave Skokie , IL 60077 USA

AmeriCash Loans Corporate 880 Lee St Ste 300 Des Plaines , IL 60016 USA

Blue Cross Blue Shield PO Box 105370 Atlanta , GA 30348 USA

Bradley S Ross 7126 N Lincoln Ave Lincolnwood , IL 60712 USA

Peritus Portfolio Services II, LLC PO Box 141419 Irving , TX 75014 USA

Santander Consumer USA ATT POC: Janiscia Jackson PO Box 961245 Fort Worth , TX 76161 USA

JPMORGAN CHASE BANK 2000 MARCUS AVENUE NEW HYDE PARK , NY 11042 USA

Cigna Health Spring PO Box 20012 Nashville , TN 37202 USA

City of Chicago Parking 121 N. LaSalle St # 107A Chicago , IL 60602 USA

Linebarger Goggan Blair & Sampson LLP 2700 Via Fortuna Dr.., Ste 400 Austin , TX 78746 USA

Arnold Scott Harris PC 111 W Jackson # 600 Chicago , IL 60604 Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 67 of 81

USA

Community Consolidated School District 59 2123 S Arlington Heights Rd Arlington Hts , IL 60005 USA

Cook County State's Attorney's Bad Check Restitution Program Po Box A3984 Chicago , IL 60690 USA

Kroger Check Recovery Center Po Box 30650 Salt Lake Cty , UT 84130 USA

DirecTV PO Box 105261 Atlanta , GA 30348 USA

AT&T Mobility II LLC One AT&T Way Room 3A104 Bedminster , NJ 07921 USA

ENHANCED RECOVERY CORP 8014 BAYBERRY RD JACKSONVILLE , FL 32256 USA

Comcast 11621 E. Marginal Way # 5 Bankruptcy Dept Seattle , WA 98168 USA

ER Solutions/Convergent Outsourcing, INC Po Box 9004 Renton , WA 98057 USA

United Student Aid Funds, Inc. PO Box 9460 Wilkes Barre , PA 18773 USA

Navient 1002 ARTHUR DR LYNN HAVEN , FL 32444 USA

PLS Financial Solutions of Illinois, Inc. 800 Jorie Blvd. Oak Brook , IL 60523 USA

Northshore Hospital 2650 Ridge Ave. Evanston, IL 60201 Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 69 of 81

USA

Terminex 860 Ridge Lake Blvd Memphis , TN 38120 USA

Illinois Tollway PO Box 5544 Chicago , IL 60680 USA

GLC Financial 3200 Nw 62nd Ave # 203 Margate , FL 33063 USA

IDES P O Box 4385 Benefit Payment Control Division Chicago , IL 60680 USA

Peter G Chioros DPM 600 W Lake Cook Rd Ste 160 Buffalo Grove , IL 60089 USA

Village of Skokie 5127 Oakton Street Skokie , IL 60077 USA

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 71 of 81

Debtor 1 Patricia First Name	A	Denson	_ Case number (if known)	
	Middle Name uestions for Reporting Purp	Last Name		
16. What kind of debts do you have?	16a. Are your debts prima	rily consumer debts? an individual primarily rily business debts? siness or investment or	for a personal, family Business debts are de through the operation	ebts that you incurred to
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	No. I am not filing under Chapter Yes. I am filing under Chapter paid that funds will be ava No. Yes.		any exempt property is exclured creditors?	uded and administrative expenses are
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,000 5,001-10,000 10,001-25,00	0	25,001-50,000 50,001-100,000 More than 100,000
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	-	Cloni	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20. How much do you estimate your liabilities to be?	✓ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million		PODE	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Part76 Sign Below			Cocces	
	and correct. If I have chosen to file under 11,12, or 13 of title 11, United choose to proceed under Chalf no attorney represents me me fill out this document, I half request relief in accordance I understand making a false a connection with a bankruptcy years, or both. 18 U.S.C. §§ /s/ Patricia Denson Signature of Debtor 1 Executed on 9/29/2016	Chapter 7, I am aware d States Code. I unders apter 7. and I did not pay or agave obtained and read with the chapter of titlestatement, concealing processes can result in fine	e that I may proceed, stand the relief available to pay someone the notice required by a 11, United States Coroperty, or obtaining up to \$250,000, or its sup to \$250,000, or its supplies to \$2	who is not an attorney to help y 11 U.S.C. § 342(b). ode, specified in this petition, money or property by fraud in imprisonment for up to 20

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 72 of 81

Fill in this info	ormation to identify your case	₽.			
Debtor 1	Patricia	Α	Denson		
	First Name	Middle Name	Last Name		
Debtor 2	inct m				
(Spoose, ii iii	ing) First Name	Middle Name	Last Name	1	
United States	s Bankruptcy Court for the:	Northern	District of Illinois		
Case number (If known)	*		(State)	MALFORNIA IN	
Official	Form 106De	C			Check if this is ar amended filing
Declara	ation About ar	n Individual De	btor's Sched	lules	12/15
f two married	d people are filing togethe	r, both are equally responsi	ble for supplying correc	t information.	
Parist Sig		Making in the Control of the Control	National Company of the Company of t	At distribution and the state of the state o	A THE STATE OF THE
Did you	pay or agree to pay some	one who is NOT an attorney	to help you fill out bank	ruptcy forms?	
✓ No		•			
Yes.	Name of person		Attach Bankruptcy F Signature (Official F	Petition Preparer's Notice, Declaration, and Form 119).	
Under p	enalty of perjury, I declare	that I have read the summa	ry and schedules filed w	vith this declaration and	
that they	y are true and correct.	^			
🗶 /s/ Patri	- Selver Evilve	IN (PRASI)	×		
Signature	of Debtor 1		Signature	of Debtor 2	
Date 9/2	9/2016		Date		
M	M/DD/YYYY			M/DD/YYYY	

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 73 of 81

Debtor 1			A	Denson	Case number (# known)
	First Name		Middle Name	Last Name	***************************************
8. Wit	thin 2 years before ditors, or other par	you filed for rties.	oankruptcy, did ye	ou give a financial staten	nent to anyone about your business? Include all financial institutions
2	No Yes. Fill in the detail	ils below.			
				Date issued	
	Name			MM/DD/YYYY	_
	Number Street		Personal de la companya de la compan	···	
	City	State	Zip Code	_	
ari 12:	Sign Below				
true	and correct. I unde truptcy case can re	erstand that n sult in fines u Patricia Densc	paking a false stat p to \$250,000, or i	ement, concealing prop	nents, and I declare under penalty of perjury that the answers are erty, or obtaining money or property by fraud in connection with a pyears, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
	Signatu	ure of Debtor 1			Signature of Debtor 2
	Date :	9/29/2016			Date
Did y	ou attach addition	al pages to Y	our Statement of	Financial Affairs for Indi	viduals Filing for Bankruptcy (Official Form 107)?
mercen a	No ⁄es				
Did y	ou pay or agree to	pay someon	who is not an att	orney to help you fill out	bankruptcy forms?
Z ·	No				
	Yes. Name of person				Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 74 of 81

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Denson, Patricia A Debtor(s)	Case No		
	Dostor(c)	Chapter.	Chapter13	
	VERIFICATIO	N OF CREDITOR MAT	TRIX	
	The above named Debtors hereby verify that the	attached list of creditors is true	e and correct to the best of their knowledge.	
Date:	9/29/2016	/s/ Denson, Patr Denson, Patricia Signature of Del	a A	

Debl	Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Nor 1 Patricia A Documenta Page 75 of Sumber (if known)	Main
16.	Calculate the median family income that applies to you. Follow these steps:	
	16a. Fill in the state in which you live. Illinois	
	16b. Fill in the number of people in your household.	
	16c. Fill in the median family income for your state and size of household To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.	\$49,741.00
17.	How do the lines compare?	
	17a. Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Disposable Income (Official Form 122C-2).	
	17b. Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Disposable Income (Official Form 122C-2), On line 39 of that form, copy your current monthly income from line 14 above.	
Pari	Calculate Your Commitment Period Under 11 U.S.C. §1325(b)(4)	
18.	Copy your total average monthly income from line 11.	\$897.24
19.	Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13.	
	19a. If the marital adjustment does not apply, fill in 0 on line 19a.	-\$0.00
20.	19b. Subtract line 19a from line 18. Calculate your current monthly income for the year. Follow these steps:	\$897.24
	20a. Copy line 19b.	\$897.24
	Multiply by 12 (the number of months in a year).	x 12
	20b. The result is your current monthly income for the year for this part of the form.	\$10,766.88
	20c. Copy the median family income for your state and size of household from line 16c.	\$49,741.00
21.	How do the lines compare?	
	Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4.	
	Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4.	
Part	Sign Below	
	By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. ** Is/ Patricia Denson ** Signature of Debter 1.	e e e e e e e e e e e e e e e e e e e
	Signature of Debtor 1 Signature of Debtor 2	
	Date 10/3/2016 Date MM/DD/YYYY MM/DD/YYYY	
	If you checked 17a, do NOT fill out or file Form 122C-2. If you checked 17b, fill out Form 122C-2 and file it with this form. On fine 39 of that form, copy your current monthly income from line above.	4

B 203 (12/94)

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

re _	Patricia A Denson		Case No.	
	Debtor		***************************************	(If known)
			Chapter	Chapter 13
	DISCLOSURE OF	COMPENSATION	OF ATTORNEY FO	OR DEBTOR
	Pursuant to 11 U.S.C. § 329(a) and that compensation paid to me within services rendered or to be rendered is as follows:	in one year before the filing of	the petition in bankruptcy or	agreed to be naid to me for
	For legal services, I have agreed to	o accept		\$4,000.0
	Prior to the filing of this statement	I have received		\$350.0
	Balance Due			\$3,650.0
2.	The source of the compensation pa	aid to me was:		
	Debtor	Other (specify)		
3.	The source of the compensation pa	nid to me is;		
	Debtor	Other (specify)		
4.	I have not agreed to share the members and associates of m	above-disclosed compensatio y law firm.	n with any other person unles	s they are
To a constant of	I have agreed to share the about members or associates of my the people sharing in the comp	law firm. A copy of the agreer	th a other person or persons w ment, together with a list of the	ho are not e names of
5.	In return for the above-disclosed fe a. Analysis of the debtor's final bankruptcy;	e, I have agreed to render leg ncial situation, and rendering a	gal service for all aspects of the advice to the debtor in determi	e bankruptcy case, including: ning whether to file a petition in
	b. Preparation and filing of any	petition, schedules, statemer	nts of affairs and plan which m	ay be required;
	c. Representation of the debto	r at the meeting of creditors ar	nd confirmation hearing, and a	ny adjourned hearings thereof;
	d. Representation of the debto	r in adversary proceedings an	d other contested bankruptcy	matters;
6. I	By agreement with the debtor(s), th	e above-disclosed fee does no	ot include the following service	es:
	terrenovember (in the control of the	CERTIFICATIO	ON	
l c f the	certify that the foregoing is a complication debtor(s) in this bankruptcy proceeds	ete statement of any agreeme adings.	ent or arrangement for payme	nt to me for representation
	9/29/2016		/s/ Ryan Crotty	
	Date		Signature of Attorney	**************************************
			Semrad Law Firm	
	•	**************************************	Name of law firm	



UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 78 of 81

6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.



Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 79 of 81

- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

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D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

 Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$387.00



Case 16-31573 Doc 1 Filed 10/03/16 Entered 10/03/16 16:06:28 Desc Main Document Page 81 of 81

- 3. Before signing this agreement, the attorney has received, \$350.00 toward the flat fee, leaving a balance due of \$3,650.00; and \$77.00 for expenses, leaving a balance due of \$4,037.00
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date:	9/29/2016
Signed:	
/s/ Patri	cia Denson
<u>批订</u>	iria a. Denson
Debtor(s	5)

Attorney for Debtor(s)

Do not sign if the fee amounts at top of this page are blank.